

Evacuation Map
by ADS
August 2019 cl


Notes:
1 Not to scale
2 Assembly Area
3 Evacuation Route
4 Wind Sock


Attachment 2

PHOTOGRAPH LOG

July 29, 2019


Page 2


DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 1	
COMMENTS: View of a 275-gallon tote labeled “material from filter.” It was unclear if this was considered a hazardous waste. TVA readings above the tote were 1,850 ppm.	 A photograph of a large, yellow, rectangular tote (Intermediate Bulk Container) with a metal frame. A yellow protective cage is positioned in front of the tote. A white label is attached to the cage, reading "Material from Filter". The tote is situated in an industrial setting with other containers and equipment visible in the background.

DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 2	
COMMENTS: View of a tote labeled “Rejected Batch FX40/0759.” The EPA Inspection Team requested follow-up information from the facility as to the hazards associated with this batch.	 A photograph of a large, white, rectangular tote (Intermediate Bulk Container) with a metal frame. A white label is attached to the tote, reading "REJECTED BATCH FX40/0759". The tote is situated in an industrial setting with other containers and equipment visible in the background.

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DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 3 COMMENTS: View of the barcode and product name for the tote shown in photo #2.	

DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 4 COMMENTS: View of a spent filter in a bucket located in Building 40. The EPA Inspection Team requested a hazardous waste profile for this material.	

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DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 5 COMMENTS: View of hazardous waste buckets in the 90-day storage area dated "12/28/18." Based on the date, the buckets had been in the 90-day storage area for 207 days.	 A photograph showing two white plastic hazardous waste buckets sitting on a wooden pallet. The buckets have yellow labels with black text that reads "HAZARDOUS WASTE" and "HANDLE WITH CARE". The buckets are slightly weathered and are in an outdoor storage area with a concrete wall and ground visible in the background.

DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 6 COMMENTS: View of a fiber drum in the 90-day storage area with a large dent. The drum was labeled "Aminoacetic Acid."	 A photograph showing a large orange fiber drum with a significant dent on its side. The drum is sitting on a wooden pallet. Other drums and white bags are visible in the background. The drum has a label that is partially visible, showing "Aminoacetic Acid".

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DATE TAKEN: 07/23/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 7 COMMENTS: View of the 90-day storage area. The hazardous waste buckets and fiber drum from Photograph 5 and Photograph 6 are shown.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 8 COMMENTS: View of a 55-gallon drum with significant corrosion on the south side of Building 71. A large portion of the drum was open and the drum was half-full of brown-yellow liquid. The drum was labeled "Caustic Soda."	


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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 9 COMMENTS: View of the “Caustic Soda” label for Photograph 8.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 10 COMMENTS: Alternate view of a 55-gallon drum with significant corrosion on the south side of Building 71. A large portion of the drum was open, and the drum was half-full of brown-yellow liquid. The drum was labeled “Caustic Soda.”	

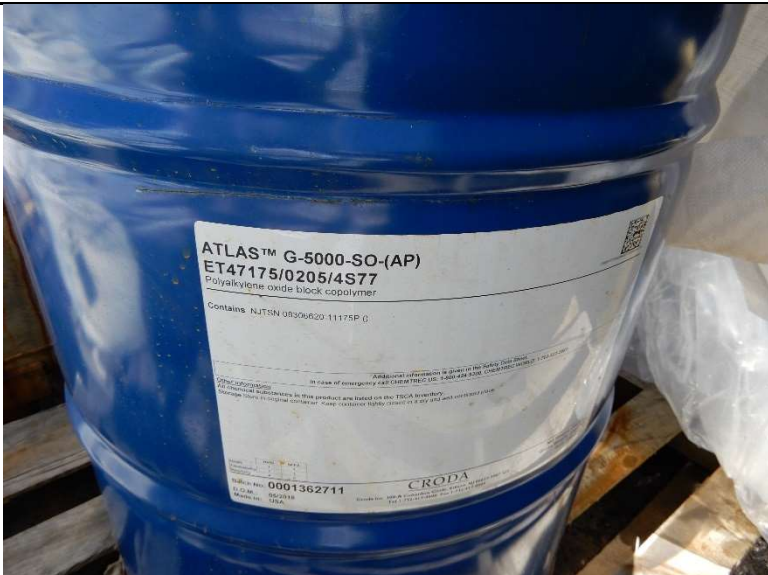
DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 11 COMMENTS: View of a tote labeled “Mother liquor with solids” on the south side of Building 71. The tote was also labeled as a flammable liquid. Facility representatives stated that this tote was filled from process tank T7119.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 12 COMMENTS: View of the tote label “Mother liquor with solids” from photo #11.	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 13 COMMENTS: View of a corroded 55-gallon drum with an open bung hole in the lid on the south side of Building 71. The drum was labeled "Atlas G-5000."	

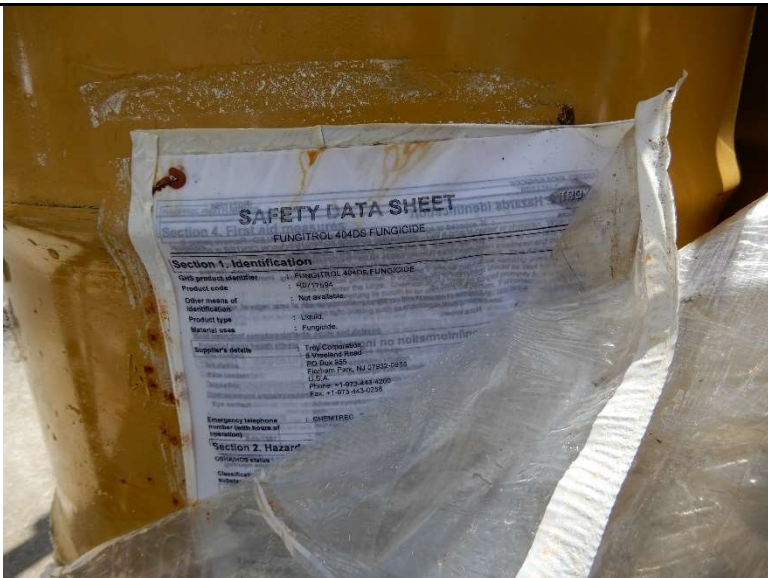
DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 14 COMMENTS: View of the "Atlas G-5000" label for Photograph 13.	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 15 COMMENTS: View of a corroded 55-gallon drum on the south side of Building 71. The drum was labeled “Sodium Hydroxide, Solid” and was on top of a pallet placed on other drums.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 16 COMMENTS: View of two 55-gallon drums inside the QA Cage labeled “Unknown.”	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 17 COMMENTS: View of the label for one of the yellow 55-gallon drums from Photograph 16. This label identifies the drum as containing "Fungitrol 404DS Fungicide;" however, another label on the drum indicated that its contents were unknown.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 18 COMMENTS: View of a flammable liquid with heavy corrosion and bulging on top of the drum inside the QA Cage. Note that there was a pallet with additional 55-gallon drums stored on top of this drum.	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 19 COMMENTS: View of four 55-gallon drums inside the QA Cage containing flammable liquids with heavy corrosion and bulging on top of the drums.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 20 COMMENTS: View of four 55-gallon drums inside the QA Cage with duct-tape covering the lids. The label identified the contents of the drums as "Zinc Pyrithione."	


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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 21 COMMENTS: View of two fiber drums stored outside in the QA Cage. Significant staining was observed on the outside of the drums.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 22 COMMENTS: View of a phone near the 90-day storage area without emergency contact information.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 23 COMMENTS: View of two 55-gallon drums with unclear labels in Building 61. The drum on the left is labeled as a flammable liquid. It is both labeled with a product name (i.e., Mergal 174) and “waste”. The drum on the right is also labeled “N-44” and “waste.” The drum on the right was open and had a funnel inside of the lid.	


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 24 COMMENTS: View of an unlabeled, open 5-gallon container in Building 61 containing an unknown liquid. A nearby 5-gallon bucket was labeled “Dirty PF.”	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 25 COMMENTS: View of a 55-gallon drum (left) inside Building 61 containing a flammable liquid. Note that the drum was not labeled with the name of the chemical contained.	 A photograph showing two large black 55-gallon drums in an industrial setting. Both drums have a red diamond-shaped hazard label with a flame icon and the text 'FLAMMABLE LIQUID'. Cardboard boxes are placed on top of the drums; one box has 'Rieke' and 'reagentsystems' printed on it. A red funnel is visible on the drum to the right. In the foreground, a smaller black container with a white handle is partially visible.


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 26 COMMENTS: View of two open, unlabeled buckets containing an unknown liquid inside Building 61.	 A photograph showing two open black buckets filled with a dark, opaque liquid. They are situated on a concrete floor next to complex industrial machinery, which includes pipes, valves, and a large stainless steel tank. A yellow tag with the text 'VP 6554' is attached to the machinery. The scene appears to be inside a chemical processing building.


DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 27	
COMMENTS: View of 55-gallon drums stored outside and uncovered in an area behind Building 61 that slopes toward a neighboring property. There were 52 drums labeled “On Hold Pending Analysis.”	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 28	
COMMENTS: Alternate view of 55-gallon drums stored outside and uncovered in an area behind Building 61 that slopes toward a neighboring property. There were 52 drums labeled “On Hold Pending Analysis.”	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 29 COMMENTS: View of various chemicals in a cabinet inside of the small lab area. Lab personnel stated that these chemicals had not been used in two to three years.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 30 COMMENTS: View of two 55-gallon drums outside of Building 99 with labels stating, "Pending Analysis."	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 3 COMMENTS: View of two unlabeled 55-gallon drums along the east perimeter fence of the facility.	 A photograph showing two dark, unlabeled 55-gallon drums sitting on a wooden pallet. The pallet is on a dirt surface. In the background, there is a dense line of green bushes and trees. A red strap is visible on the right side of the drums.

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 32 COMMENTS: View of the two roll-off containers containing contaminated soil from the Superfund site.	 A photograph showing two large red roll-off containers. They are covered with black tarps. The containers are parked on a dirt area. To the right, there is a stack of wooden pallets. In the background, there are green trees and a clear sky.

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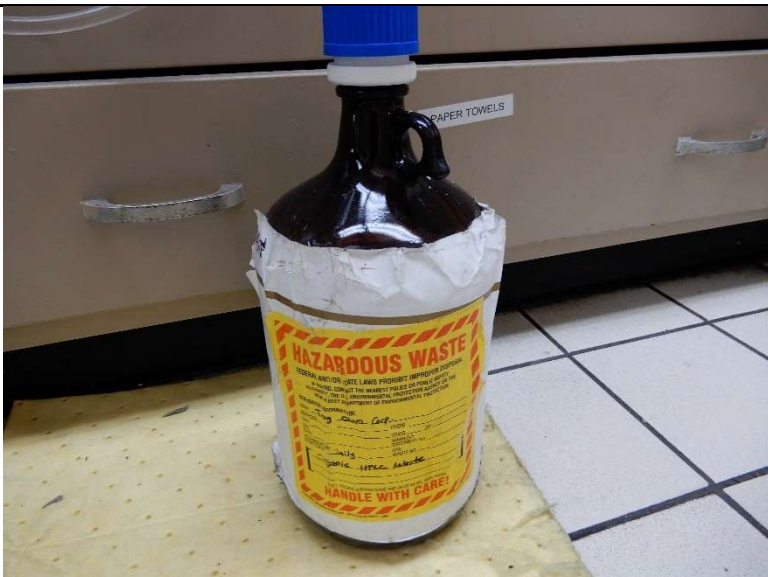
DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 33 COMMENTS: Another view of the two roll-off containers containing contaminated soil from the Superfund site.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 34 COMMENTS: Close-up view of the hazardous waste label on the right roll-off container in Photograph 33. The information on the label was faded and unreadable.	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 35 COMMENTS: View of two containers labeled “Waste Drum” inside the old R&D Lab/Building 99. The containers were dated 6/12/2019 and no information on the contents or the hazards of the wastes in the containers was available.	 A photograph showing two large black plastic drums on a light-colored tiled floor. The drum on the left is taller and has a white label that reads "Waste Drum" and "6/12/19". The drum on the right is shorter and wider, also with a white label. In the background, a black office chair and a person's leg in a white lab coat and brown shoe are visible.

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 36 COMMENTS: View of a small hazardous waste container inside the QA lab. The label only states “Organic HPLC Waste” and does not list the specific hazards.	 A photograph of a small, dark-colored plastic bottle with a blue cap, sitting on a light-colored wooden lab bench. The bottle has a yellow and red hazard label that reads "HAZARDOUS WASTE" and "Organic HPLC Waste". The label also includes a section for "HAZARD STATEMENT" and "HANDLING INSTRUCTIONS". In the background, a white lab bench with a "PAPER TOWELS" sign is visible.


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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 37 COMMENTS: View of additional small hazardous waste containers inside the QC lab. The labels do not list the specific hazards.	
DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 38 COMMENTS: View of the satellite accumulation area for lab waste located in the warehouse adjacent to the QA lab. Note that there were two 55-gallon drums labeled as containing hazardous waste but the contents of the drums and the hazards of the wastes were not identified on the label.	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 39 COMMENTS: View of the universal waste storage area inside the Maintenance Building. Note that the lamps were not dated.	 A photograph of a storage area inside a building. In the foreground, there are several cardboard boxes, one of which is labeled 'VaporShield'. To the left, a red drum is visible. In the background, a person wearing a blue shirt and jeans is standing. The floor is concrete.

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 40 COMMENTS: View of a lamp inside the Maintenance Building that was found in a garbage container separate from the universal waste storage area.	 A photograph showing a person's hand holding a large, clear, oval-shaped lamp. The lamp is being held over a black container. In the background, there are various items including a green container, a white bucket, and a box labeled 'GRAIN'. A person's arm in a blue shirt is visible on the left.

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 41	
COMMENTS: View of a bag labeled “Glycine – store in a cool dry place” open and spilled on the ground near the south side of Building 71.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 42	
COMMENTS: Close-up view of the Glycine label from Photograph 41.	

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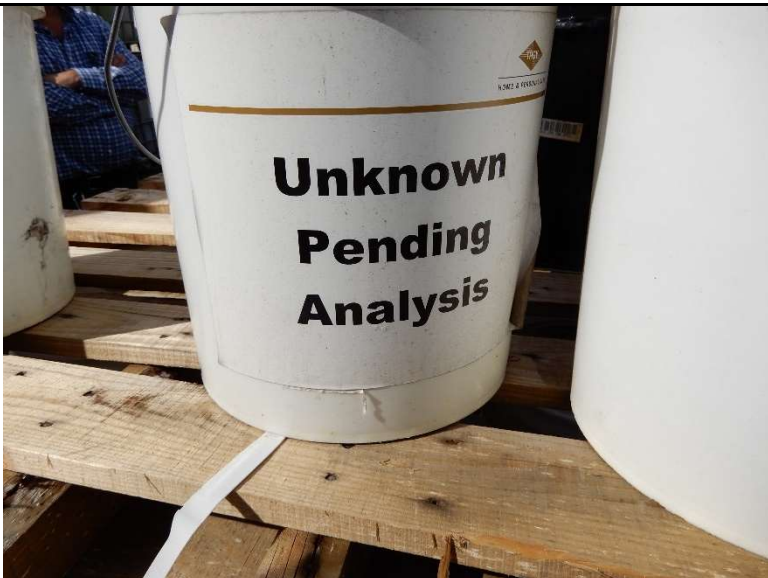
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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 43	
COMMENTS: View of a pallet of 5-gallon buckets near the south side of Building 71. The buckets contained various labels including “Unknown Pending Analysis” and “Selenium Dioxide.” Note that the pallet did not appear stable.	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 44	
COMMENTS: View of one bucket on the pallet from Photograph 43 labeled “Selenium Dioxide.”	

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DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 45 COMMENTS: View of another bucket on the pallet from photo #43 labeled "Unknown Pending Analysis."	

DATE TAKEN: 07/24/2019	
TAKEN BY: Cassidy Owen	SITE LOCATION: Troy Chemical
PHOTO #: 46 COMMENTS: View of a drum near the south side of Building 71 labeled "Waste Chemicals" and dated "1/10." It was not clear what chemicals were or the hazards associated with the chemicals.	



NJDEP
Hazardous Waste Regulation Program
Manifest Section
P.O. Box 420
Trenton, New Jersey 08625-0421

Date: 12-14-18

RE: Manifest Discrepancies

To Whom It May Concern:

Attached are manifest(s), which have a significant manifest discrepancy as defined in 40 CFR 264, or it is necessary to make you aware of another type of discrepancy. Corrections have been made in section 18 or 35.

Please contact me if you have any questions or require additional information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Nick Prevosti'.

Nick Prevosti
Regulatory Compliance Officer

Cc Generator

Troy Chemical Manifest Discrepancy
One Avenue L
Newark, NJ 07196

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517		2. Page 1 of 2		3. Emergency Response Phone (908) 354-0210		4. Manifest Tracking Number 017955700 JJK						
		5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07196 Generator's Phone: (973) 589-2500								Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL, INC.		U.S. EPA ID Number NJ0000040667												
7. Transporter 2 Company Name		U.S. EPA ID Number												
8. Designated Facility Name and Site Address Cycle Chem Inc. 217 South First Street Elizabeth, NJ 07206 Facility's Phone: (908) 355-5800		U.S. EPA ID Number NJ0002200046												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes				
		RQ 1 UN1993 WASTE FLAMMABLE LIQUIDS, N.O.S. (METHANE) 3 PG II (RD 0001 100H F003 100H) ERGH 128				04 DM		1100	P	F001 F003 F005				
		RQ 2 UN1993 WASTE FLAMMABLE LIQUIDS, N.O.S. (PROPOXY 2-PROPANOL) 3 PG III (RD 0001 100H Hydroquinone 100H) ERGH 128				01 DF		050	P	F001				
		X 3 UN3267 WASTE CORROSIVE LIQUID, BASIC, ORGANIC, N.O.S. (1,2 BENZISOTHAZOLIN-3-ONE SODIUM HYDROXIDE) 8 PG II ERGH 153				01 DF		050	P	F002				
		RQ 4 UN1993 WASTE FLAMMABLE LIQUIDS, N.O.S. (METHANOL) 3 PG II (RD 0001 100H F003 100H) ERGH 128				04 TP		8600	P	F001 F003				
14. Special Handling Instructions and Additional Information LDR On File 970099/920602/211150/355631 (1)FMI-1 LAB WASTE (2)FMI-32 TROYMAX ANTISKIN OL (3)TWD-74 TROYSAN 590 (4)FMI-18 POLYPHASE FLAMMABLE														
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.														
Generator's/Officer's Printed/Typed Name X JAMES C MAUZELCA										Signature <i>[Signature]</i>		Month 4	Day 17	Year 18
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____													
	Transporter signature (for exports only): _____													
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials													
	Transporter 1 Printed/Typed Name MARL MURRAY					Signature <i>[Signature]</i>					Month 7	Day 17	Year 18	
Transporter 2 Printed/Typed Name					Signature					Month	Day	Year		
DESIGNATED FACILITY	18. Discrepancy													
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input checked="" type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection 96.20 UN2924 13.20 add D002 19.20 change to H141 Manifest Reference Number: _____													
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____													
	Facility's Phone: _____													
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____													
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)														
1. H001		2. H001		3. H110		4. H001								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a														
Printed/Typed Name V Joseph					Signature <i>[Signature]</i>					Month 4	Day 19	Year 18		

GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of	3. Emergency Response Phone		4. Manifest Tracking Number 017955244 JJK		
		5. Generator's Name and Mailing Address IRBY CHEMICAL ONE AVENUE L NEWARK, NJ 07102 Generator's Phone: (973) 585-2500							
6. Transporter 1 Company Name NEWARK ENVIRONMENTAL, INC.							U.S. EPA ID Number		
7. Transporter 2 Company Name							U.S. EPA ID Number		
8. Designated Facility Name and Site Address Cycle Data Inc. 317 South First Street Elizabeth, NJ 07206 Facility's Phone: (908) 345-5800							U.S. EPA ID Number		
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		1. UN2815 CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S. (15% CHLORINE) 3 PG III ERG 152							
		2. UN1263 WASTE FLAMMABLE LIQUIDS, N.O.S. (NAPHTHA, STANDARD SOLVENT) 3 PG III ERG 125			01	DM	200	P	1001
		3. UN1263 WASTE CORROSIVE LIQUID, ACIDIC, ORGANIC, N.O.S. (15% CHLORINE) 3 PG III (ERG 152)			01	TP	2000	P	1002
		4. UN1263 WASTE CORROSIVE LIQUID, BASIC, INORGANIC, N.O.S. (SODIUM HYDROXIDE) 3 PG III ERG 154			01	DF	450	P	1002
14. Special Handling Instructions and Additional Information 970000/925002/209201/353374 (1)LS-12 MERCAL (12N 12)FRI-19 TRYSOL AFL WITH NAPHTHA (3)TAD-22 MERCAL 756 (4)TND-27 MERCAL BIT20									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name JAMES C MANZELLA					Signature <i>[Signature]</i>		Month Day Year 1 26 18		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials								
TRANSPORTER	Transporter 1 Printed/Typed Name John W Rice					Signature <i>[Signature]</i>		Month Day Year 1 26 18	
	Transporter 2 Printed/Typed Name					Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____								
	18b. Alternate Facility (or Generator) U.S. EPA ID Number								
	Facility's Phone: _____								
	18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1.		2. H041		3. H110		4. H113			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name V Joseph					Signature <i>[Signature]</i>		Month Day Year 1 26 18		

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number	22. Page	23. Manifest Tracking Number		
24. Generator's Name						
25. Transporter _____ Company Name				U.S. EPA ID Number		
26. Transporter _____ Company Name				U.S. EPA ID Number		
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		No.	Type			
	FLAMMABLE LIQUIDS, N.O.S. (METHANOL SPIRITS) 3 PG II ERM 122	01	DF	200	P	
	FLAMMABLE LIQUIDS, N.O.S. (METHANOL SPIRITS) 3 PG II ERM 122					
	FLAMMABLE LIQUIDS, N.O.S. (METHANOL SPIRITS) 3 PG II ERM 122	05	DF	900	P	
	FLAMMABLE LIQUIDS, N.O.S. (METHANOL SPIRITS) 3 PG II ERM 122	02	TP	4500	P	
	FLAMMABLE LIQUIDS, N.O.S. (METHANOL SPIRITS) 3 PG II ERM 122	03	DM	500	P	
32. Special Handling Instructions and Additional Information						
33. Transporter _____ Acknowledgment of Receipt of Materials						
Printed/Typed Name		Signature		Month	Day	Year
John W. Br		[Signature]		7	26	18
34. Transporter _____ Acknowledgment of Receipt of Materials						
Printed/Typed Name		Signature		Month	Day	Year
35. Discrepancy						
36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517	2. Page 1 of 2	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020073360 JJK		
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 9735892500 Generator's Phone:				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL				U.S. EPA ID Number NJR000040867			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800 Facility's Phone:				U.S. EPA ID Number NJ0002200046			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1) UN1993 Waste Flammable liquids, n.o.s. (METHANE) 3 PG II					D001 F003
	X	2) UN1993 Waste Flammable liquids, n.o.s. (HYDROTREATED HEAVY NAPHTHA) 3 PG III	011	DM	1800	P	D001
	X	3) UN1993 Waste Flammable liquids, n.o.s. (METHANE) 3 PG II	010	DM	1050	P	D001 F003 F005
	X	4) UN1993 Waste Flammable liquids, n.o.s. (MINERAL SPIRITS) 3 PG II	004	DM	1600	P	D001
14. Special Handling Instructions and Additional Information Document D10230 Sales Order 9153 1) Profile#FM1-18 POLYPHASE WD17 DOT ERG#128 2) Profile#FM1-103 TROYTHIX21BA DOT ERG#128 3) Profile#FM1-1 LAE WASTE DOT ERG#128 4) Profile#FM1-41 TROYMAX CERLUM 12 DOT ERG#128							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name WILLIAM REILLEY				Signature William Reilly		Month Day Year 12 28 18	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name John Rice		Signature John Rice		Month Day Year 12 28 18		
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection 10-2) 12 not 11 10-3) 9 not 10						
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)				Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H061		2. H061		3. H061		4. H061	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name V. Joseph				Signature V. Joseph		Month Day Year 12 28 18	

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number NJID002144517	22. Page 2 of 2	23. Manifest Tracking Number 020073360.LJK		
24. Generator's Name TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105						
25. Transporter _____ Company Name				U.S. EPA ID Number		
26. Transporter _____ Company Name				U.S. EPA ID Number		
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		No.	Type			
X	5) UN3268 Waste Corrosive liquid, basic, inorganic, n.o.s. (Sodium hydroxide) 8 PG II					D002
X	6) UN3268 Corrosive liquid, basic, inorganic, n.o.s. (Sodium Hydroxide) 8 PG III					D002
X	7) UN3265 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOTHAZOLINONES) 8 PG II					D002
X	8) UN3265 Corrosive liquid, acidic, organic, n.o.s. (ISOTHAZOLINONES) 8 PG II					D002
X	9) RQ UN3267 Corrosive liquid, basic, organic, n.o.s. (HEXAMETHYLENE-5-(5-METHYL-4-PYRONYL)-1,3,4-TRIAZINE) 8 II					D002
X	10) UN2735 Amines, liquid, corrosive, n.o.s. (2-Methyl-1,5-pentanediamine) 8 PG II					D002
X	11) UN1760 Corrosive liquids, (3 PHENYL 2 PROPANOL) 8 PG II	003	DF	150	P	(72)
X	12) RQ NA3077, Hazardous waste, solid, n.o.s. (POLYVINYL CHLORIDE HOMOPOLYMER, ARSENIC), 9, III	001	CF	60	P	D004
32. Special Handling Instructions and Additional Information 5) Profile# TWD-27 MERGAL BIT20 DOT ERG# 154 6) Profile# WD-73 MERGAL 680 DOT ERG# 154 7) Profile# TAD-29 MERGAL 758 DOT ERG# 153 8) Profile# LS-37 MERGAL K12N DOT ERG# 153 9) Profile# TWD-224 TROYKYD C13 DOT ERG# 153 10) Profile# R100-115 DYTEKA AMINE DOT ERG# 153 11) Profile# LS-222 TROYCARE EPP 19 DOT ERG# 154 12) Profile# PC07-11 MICROPEL 5 PVC-F DOT ERG# 171						
33. Transporter _____ Acknowledgment of Receipt of Materials Printed/Typed Name Signature Month Day Year John Hise 12 28 18						
34. Transporter _____ Acknowledgment of Receipt of Materials Printed/Typed Name Signature Month Day Year						
35. Discrepancy						
36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
H121		H110		H121		H141
H141		H141		H141		H121

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517	2. Page 1 of 2	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020073360 JJK			
5. Generator's Name and Mailing Address PRO-TECH ENVIRONMENTAL ONE AVENUE L NEWARK, NJ 07105 9735892500			Generator's Site Address (if different than mailing address)					
6. Transporter 1 Company Name PRO-TECH ENVIRONMENTAL			U.S. EPA ID Number NJ000040887					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address GYLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800			U.S. EPA ID Number NJ000220046					
Facility's Phone:								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	X	1. UN1993 Waste Flammable Liquids, n.o.s. (METHANOL) 3 PG II						
	X	2. UN1993 Waste Flammable Liquids, n.o.s. (HYDROTREATED HEAVY NAPHTHA) 3 PG III	011	DM	1800	P	0001	
	X	3. UN1993 Waste Flammable Liquids, n.o.s. (METHANE) 3 PG II	010	DM	1050	P	0001 1003 1005	
X	4. UN1993 Waste Flammable Liquids, n.o.s. (MINERAL SPIRITS) 3 PG II	009	DM	1600	P	0001		
14. Special Handling Instructions and Additional Information Document: D-10230 Sales Order: 8153 1) Profile# FM-18 POLYPHASE WD17 DOT ERG#128 2) Profile# FM-103 TROYTHIX218A DOT ERG#128 3) Profile# FM-1 LANT WASTE DOT ERG#128 4) Profile# FM-41 TROYMAX CERLUM 12 DOT ERG#128								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name WILLIAM REILLEY			Signature William Reilley		Month 12	Day 28	Year 18	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	Transporter signature (for exports only): _____							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name Jesse Rive			Signature Jesse Rive		Month 12	Day 6	Year 18
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year	
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number		
	Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H001		2. H001		3. H001		4. H001		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number NJD002144517	22. Page 2 of 2	23. Manifest Tracking Number 020073360.LIK		
24. Generator's Name TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105						
25. Transporter _____ Company Name				U.S. EPA ID Number		
26. Transporter _____ Company Name				U.S. EPA ID Number		
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		No.	Type			
X	6) UN3280 Waste Corrosive liquid, basic, inorganic, n.o.s. (Sodium hydroxide), 8, III					6002
X	6) UN3280 Waste Corrosive liquid, basic, inorganic, n.o.s. (Sodium hydroxide), 8, III					602
X	7) UN3280 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOBUTYLACETATE), 8, PGII					6002
X	8) UN3280 Corrosive liquid, acidic, organic, n.o.s. (ISOBUTYLACETATE), 8, PGII					72
X	9) UN3280 Corrosive liquid, basic, organic, n.o.s. (HEXYLHYDROXYMETHYLHEXAPROPYLTETRAZINE), 8, II					72
X	10) UN3280 Ammonia, liquid, corrosive, n.o.s. (Methanol), 2, 5					72
X	11) UN1760 Corrosive liquids, (3 PHENYL 2 PROPANOL), 8 PGII	003	DF	150	P	72
X	12) RQ NA3077 Hazardous waste, solid, n.o.s. (POLYVINYL CHLORIDE HOMOPOLYMER ARSENIC), 9, III	001	CF	60	P	D004
32. Special Handling Instructions and Additional Information 6) Profile# TAD-29 MERGAL 680 DOT ERG# 154 8) Profile# WD-73 MERGAL 680 DOT ERG# 154 7) Profile# TAD-29 MERGAL 758 DOT ERG# 153 9) Profile# LS-37 MERGAL K12N DOT ERG# 153 10) Profile# TWD-224 TROYKD C13 DOT ERG# 153 11) Profile# R100-115 DYTEKA AMINE DOT ERG# 153 12) Profile# LS-222 TROYCARE EPF 18 DOT ERG# 154 13) Profile# PCU7-11 MICROPEL 5 PVC-F DOT ERG# 171						
TRANSPORTER	33. Transporter _____ Acknowledgment of Receipt of Materials					
	Printed/Typed Name John Pico	Signature <i>[Signature]</i>	Month 11	Day 28	Year 2018	
DESIGNATED FACILITY	34. Transporter _____ Acknowledgment of Receipt of Materials					
	Printed/Typed Name	Signature	Month	Day	Year	
35. Discrepancy						
36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
H101		H102		H103		H104
H141		H142		H143		H144



LAND DISPOSAL RESTRICTION NOTIFICATION AND CERTIFICATION FORM

GENERATOR NAME: TROY CHEMICAL

EPA ID NUMBER: NJD002144517

MANIFEST TRACKING NUMBER: D10230

MANIFEST DOCUMENT NO. 020073360JJK

WORK ORDER: 9163

The EPA hazardous wastes identified below must be treated to applicable treatment standards set forth in 40 CFR 268.4

LINE	APPROVAL NO.	EPA WASTE NO.(S)	WW	SUB CATEGORY	UHC'S
1	FM1-18	D001, F003	NO		
2	FM1-103	D001	NO		
3	FM1-1	D001, F003, F005	NO		
4	FM1-41	D001	NO		
5	TWD-27	D002	NO		
7	TAD-29	D002	NO		
12	PC07-11	D004	NO		

I certify and warrant that the information that appears on this form, and appended documents, is true and correct. I have correctly indicated how my waste is to be managed in accordance with 40 CFR 268. My certification is based on personal examination of the information submitted, or based on my inquiries of those individuals responsible for obtaining the information.

Authorized Signature

Wm. Riley

Title

MANAGER
ENVIRONMENTAL

Date

12/28/18

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD002144517	2. Page 1 of 1	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020507286 JJK		
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 Generator's Phone: 973-589-2500			Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name Mensch Environmental, Inc.			U.S. EPA ID Number NJR 000042667				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 Facility's Phone: 908-355-5800			U.S. EPA ID Number NJD002200046				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. UN1325 Waste Flammable solids, organic, n.o.s. (Xylene, ethyl alcohol) 4.1 PG II	01	DM	50	P	D001
	X	2. UN3265 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOTHIAZOLINS) 8 PG III	01	TP	200	P	D002
	X	3. UN1993 Waste Flammable liquids, n.o.s. (HYDROTREATED HEAVY NAPHTHA) 3 PG III	01	PM	200	P	D001
	X	4. UN3265. WASTE CORROSIVE LIQUIDS, ACIDIC ORGANIC, N.O.S. (ISOTHIAZOLINS), 8, PG III	01	DF	50	P	D001
14. Special Handling Instructions and Additional Information Document D21049 Sales Order 20751 1) Profile#SSM-12 TROYTHIX 150 ACS DOT ERG#133 2) Profile#TAD-61 MERGAL K9N DOT ERG#153 3) Profile#FM1-30 TROYMAX ZIRCONIUM 6 DOT ERG#128 4 - 9AD-61-MERGAL K9N DOT ERG#153							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name William Reilly		Signature Wm Reilly		Month 5	Day 16	Year 19	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:				
	Transporter signature (for exports only):						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Joseph Bonatti		Signature Joseph Bonatti		Month 5	Day 16	Year 19
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection 13-41 D002 not D001						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H141		2. H121		3. H061		4. H121	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name A. Green		Signature A. Green		Month 5	Day 16	Year 19	

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517	2. Page 1 of 1	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020507286 JJK	
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 Generator's Phone: 973-589-2500		Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name		U.S. EPA ID Number				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address CYCLE CHEM. INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 Facility's Phone: 908-355-5800		U.S. EPA ID Number NJ0002200046				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. UN 1325 Waste Flammable solids, organic, n.o.s. (Xylene, ethyl alcohol) 4.1 PG II	01	DM	50	P	D001
X	2. UN 3265 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOTHAZOLINS) 8 PG III	01	TP	2000	P	D002
X	3. UN 1993 Waste Flammable liquids, n.o.s. (HYDROTREATED HEAVY NAPHTHA) 3 PG III	01	DM	200	P	D001
X	4. UN 3265 WASTE CORROSIVE LIQUIDS, ACIDIC ORGANIC, N.O.S. (ISOTHAZOLINS), 8, PG III	01	DF	50	P	D001
14. Special Handling Instructions and Additional Information Document D21049 Sales Order 20751 1) Profile#SSM-12 TROYTHIX 150 ACS DOT ERG#133 2) Profile#TAD-61 MERGAL K9N DOT ERG#153 3) Profile#FM1-30 TROYMAX ZIRCONIUM 6 DOT ERG#128 4 - TAD-61-MERGAL K9N DOT ERG#153						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name WILLIAM BEILLEY		Signature Wm Beilley		Month 5	Day 16	Year 17
16. International Shipments Transporter signature (for exports only):		<input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:		
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H141		2. H121		3. H061		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year

Please print or type.

Form Approved. OMB No. 2050-0039

D12284

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD002144517	2. Page 1 of 2	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020071933 JJK		
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 9735892500 Generator's Phone:				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name				U.S. EPA ID Number			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800 Facility's Phone:				U.S. EPA ID Number NJD002200046			

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
X	1. UN1993 Waste Flammable liquids, n.o.s. (METHANE) 3 PG II					8007	F005	F005
X	2. UN1993, Waste Flammable liquids, n.o.s. (NAPHTHA 1BU TOXY 2 PROPANOL), 3, III	01	DM	500	P	D001		
X	3. UN3267, Corrosive liquid, basic, organic, n.o.s. (HEXAHYDRO 1,3,5 (3 METHOXYPURONYL) TRIS TRIAZINE), 8, II	06	DF	3,000	P	72		
X	4. UN3265 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOTHIAZOLINONES) 8 PG III	01	DF	400	P	D002		

14. Special Handling Instructions and Additional Information Document D12284 Sales Order 11546

1) Profile#FM1-1 LAB WASTE DOT ERG#128 2) Profile#57450 TROYSOL 367 DOT ERG#128 3) Profile#TWD-224 TROYKYD C13 DOT ERG#153 4) Profile#TAD-28 MERGAL 758 DOT ERG#153

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offor's Printed/Typed Name <i>William Reilly</i>	Signature <i>William Reilly</i>	Month <i>3</i>	Day <i>14</i>	Year <i>19</i>
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16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: _____
Date leaving U.S.: _____

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name <i>Joseph Beatty</i>	Signature <i>Joseph Beatty</i>	Month <i>3</i>	Day <i>14</i>	Year <i>19</i>
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

0) Monarch Environmental Inc. NJR0000401667
Manifest Reference Number: _____

18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____

Facility's Phone: _____

18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. <i>H061</i>	2. <i>H141</i>	3. <i>H121</i>	4. <i>H121</i>
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20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name <i>V Joseph</i>	Signature <i>V Joseph</i>	Month <i>3</i>	Day <i>14</i>	Year <i>19</i>
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Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number NJD002144517	22. Page 2 of 2	23. Manifest Tracking Number 020071933JJK		
24. Generator's Name TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105						
25. Transporter _____ Company Name				U.S. EPA ID Number		
26. Transporter _____ Company Name				U.S. EPA ID Number		
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		No.	Type			
X	5) PG, UN3207, Corrosive liquid, basic, organic, n.o.s. (HEXAMETHYLENE TRIS (3-METHOXYPROPYL) TRIAZINE), 8 II					72
X	6) PG, UN3205, Waste Corrosive liquid, acidic, organic, n.o.s. (PHOSPHORIC ACID, SULPHURIC ACID), 8, II					5002
X	7) PG, UN3077, Hazardous waste, solid, n.o.s. (POLYVINYL CHLORIDE HOMOPOLYMER, ARSENIC), 6, III					5004
X	8) UN3265 Corrosive liquid, acidic, organic, n.o.s. (ISOTHIAZOLINONES) 8 PG II	01	TP	2200	P	72
X	9) UN2226 Amines, liquid, corrosive, n.o.s. (2-Methyl-1,5- pentanediamine) 8 PG II					72
32. Special Handling Instructions and Additional Information 5) Profile# TWO-224 TROY KYD C13 DOT ERG# 153 6) Profile# 57425 TETRA GUN BLUE AND RUST REMOVER DOT ERG# 153 7) Profile# PC0 11 MICROPEL 5 PVC-F DOT ERG# 171 8) Profile# LS-37 MERGAL K12N DOT ERG# 153 9) Profile# R100-116 DYTEK AAMINE DOT ERG# 153						
TRANSPORTER	33. Transporter _____ Acknowledgment of Receipt of Materials			Month Day Year		
	Printed/Typed Name D. J. Joseph Boatman, Jr.			Signature D. J. Joseph Boatman, Jr.		
TRANSPORTER	34. Transporter _____ Acknowledgment of Receipt of Materials			Month Day Year		
	Printed/Typed Name			Signature		
DESIGNATED FACILITY	35. Discrepancy					
	36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
	H121	H141	H141	H141	H141	
	V. T. Smith					2.14.19

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517		2. Page 1 of 2		3. Emergency Response Phone 908-354-0210		4. Manifest Tracking Number 020071933 JJK			
		5. Generator's Name and Mailing Address ONE AVENUE L NEWARK, NJ 07105 9735892500		Generator's Site Address (if different than mailing address)							
6. Transporter 1 Company Name		U.S. EPA ID Number									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800		U.S. EPA ID Number NJ0002200046									
Facility's Phone:											
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes					
		No.	Type								
X	1. UN1265 Waste Flammable liquids, n.o.s. (NAPHTHALENE)					0001	1005	1005			
X	2. UN1203, Waste Flammable liquids, n.o.s. (NAPHTHALENE BUTOXY 2 PROPANOL), 3, III	01	DM	500	P	0001					
X	3. UN3267 Corrosive liquid, basic, organic, n.o.s. (HEXAHYDRO 1,3,5-(3 METHOXYPROPYL) TRIS TRIAZINE), 8, II	06	DF	3,000	P	72					
X	4. UN3265 Waste Corrosive liquid, acidic, organic, n.o.s. (ISOTHAZOLINONES) 8 PG III	01	DF	400	P	0002					
14. Special Handling Instructions and Additional Information Document D42284 Sales Order 14546 1) Profile#FM1-1 LAB WASTE DOT ERG#128 2) Profile#57450 (ROY SOL 367 DOT ERG#128 3) Profile#TWD-224 (ROY KYD C13 DOT ERG#153 4) Profile#TAD-29 MORGAL 758 DOT ERG#153											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offoror's Printed/Typed Name WILLIAM KELLEY		Signature William Kelley				Month 3	Day 14	Year 17			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
17. Transporter Acknowledgment of Receipt of Materials											
Transporter 1 Printed/Typed Name		Signature				Month	Day	Year			
Transporter 2 Printed/Typed Name		Signature				Month	Day	Year			
18. Discrepancy											
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____											
Facility's Phone: _____											
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H061		2. H141		3. H121		4. H121					
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name		Signature				Month	Day	Year			

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)		21. Generator ID Number <div style="border: 1px solid black; padding: 2px;">NJ0002144517</div>		22. Page <div style="border: 1px solid black; padding: 2px;">2 of 2</div>	23. Manifest Tracking Number <div style="border: 1px solid black; padding: 2px;">020071933.LJK</div>		
		24. Generator's Name <div style="border: 1px solid black; padding: 2px;">TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105</div>					
25. Transporter _____ Company Name				U.S. EPA ID Number			
26. Transporter _____ Company Name				U.S. EPA ID Number			
GENERATOR	27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers No. Type		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		5) UN3265 Corrosive liquid, basic, organic, n.o.s. (N-ETHYL-2-ETHYL-5-METHOXY-2-PROPYL-1,2,4-TRIAZINE) 8 PG II					72
		6) UN3265 Corrosive liquid, acidic, organic, n.o.s. (PHOSPHORIC ACID-SULPHURIC ACID) 8 PG II					72
		7) UN3077 Hazardous waste, solid, toxic (POLYVINYL CHLORIDE-HOMO-POLYMER, ARSENIC) 8 PG II					72
		8) UN3265 Corrosive liquid, acidic, organic, n.o.s. (ISO-1-HIAZOLINONES) 8 PG II	01	TP	2200	P	72
		9) UN2335 Amides, liquid, corrosive, N.O.S. (2-Methyl-1,5-pentanediamine) 8 PG II					72
32. Special Handling Instructions and Additional Information 5) Profile# 170-224 THORATEC/13 DOT ERG# 153 6) Profile# 57425 TETRA GUN BLUE AND RUST REMOVER DOT ERG# 153 7) Profile# PC-0 1) MICROPOL 5 PVC-F DOT ERG# 171 8) Profile# LS-37 MORGAL K12N DOT ERG# 153 9) Profile# R100-115 DYTEK AAMINE DOT ERG# 15							
TRANSPORTER	33. Transporter _____ Acknowledgment of Receipt of Materials Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____						
	34. Transporter _____ Acknowledgment of Receipt of Materials Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____						
DESIGNATED FACILITY	35. Discrepancy _____						
	36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) H121 H141 H141 H141 H141						

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD002144517	2. Page 1 of 1	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020072768 JJK		
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 9735892500				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL				U.S. EPA ID Number NJR000040667			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800				U.S. EPA ID Number NJD002200046			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	X	1. UN1993, Waste Flammable liquids, n.o.s. (METHYL ETHYL KETONE OXIME), 3, II, RQ	06	DF	3200	P	D001
	X	2. UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (METHYLETHYL KETONE, OXIME) 3, II RQ	01	TP	2200	P	D00
		3.					
		4.					
14. Special Handling Instructions and Additional Information Document D15649 Sales Order 15212 1) Profile#58444 FUNGITROL 11-50S DOT ERG#128							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name William Reilly				Signature <i>William Reilly</i>		Month Day Year 3 14 19	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name Joseph Beatty				Signature <i>Joseph Beatty</i>		Month Day Year 3 14 19
	Transporter 2 Printed/Typed Name				Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator)						Month Day Year
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. H061	2. H061	3.	4.			
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name V Joseph				Signature <i>V. Joseph</i>		Month Day Year 3 14 19

Please print or type.

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD002144517	2. Page 1 of 1	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 020072768 JJK				
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07105 9735892500			Generator's Site Address (if different than mailing address)						
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL			U.S. EPA ID Number NJRD00040667						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800			U.S. EPA ID Number NJD002200046						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	X	1. UN1993, WASTE FLAMMABLE LIQUIDS, N.O.S. (METHYL ETHYL KETONE OXIME), 3 II RQ	06	DF	3200	P	D001		
	X	2. UN1993 WASTE FLAMMABLE LIQUIDS, N.O.S. (METHYL ETHYL KETONE, OXIME), 3, II RQ	01	TP	22W	P	D001		
		3.							
		4.							
14. Special Handling Instructions and Additional Information Document 015649 Sales Order 16212 1 Profile#58444 FUNGITROL 11-50S DOT ERG#128									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offoror's Printed/Typed Name William Reilly			Signature [Signature]		Month 3	Day 14	Year 19		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials								
TRANSPORTER	Transporter 1 Printed/Typed Name			Signature		Month	Day	Year	
	Transporter 2 Printed/Typed Name			Signature		Month	Day	Year	
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator) U.S. EPA ID Number								
	Facility's Phone:								
	18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H051	2.	3.	4.					
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
	Printed/Typed Name			Signature		Month	Day	Year	



LAND DISPOSAL RESTRICTION NOTIFICATION AND CERTIFICATION FORM

GENERATOR NAME: TROY CHEMICAL

EPA ID NUMBER: NJD002144517

MANIFEST TRACKING NUMBER: D12284

MANIFEST DOCUMENT NO. 020071933JJK

WORK ORDER: 11546

The EPA hazardous wastes identified below must be treated to applicable treatment standards set forth in 40 CFR 268.4

LINE	APPROVAL NO.	EPA WASTE NO.(S)	WW	SUB CATEGORY	UHC'S
1	FM1-1	D001, F003, F005	NO		
2	57450	D001	NO	Ignitable Wastes (TOC>10%)	
4	TAD-29	D002	NO		
6	57425	D002	NO		
7	PC07-11	D004	NO		

I certify and warrant that the information that appears on this form, and appended documents, is true and correct. I have correctly indicated how my waste is to be managed in accordance with 40 CFR 268. My certification is based on personal examination of the information submitted, and based on my inquiries of those individuals responsible for obtaining the information.

Authorized Signature

Wm Keilley

Title

ENVIRONMENTAL
MANAGER

Date

3/14/19

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144517	2. Page 1 of 1	3. Emergency Response Phone 908-464-9200	4. Manifest Tracking Number 016809929 JJK			
5. Generator's Name and Mailing Address ANCO Environmental Services 1 Russo Place		Generator's Site Address (if different than mailing address) ANCO One Avenue L Newark NJ 07106						
Generator's Phone: 908-464-9200 Berkeley Heights NJ 07922		U.S. EPA ID Number NJ0002144517						
6. Transporter 1 Company Name Anco		U.S. EPA ID Number						
7. Transporter 2 Company Name		U.S. EPA ID Number						
8. Designated Facility Name and Site Address Clean Earth of North Jersey 105 Jacobus Ave.		U.S. EPA ID Number NJ0991291105						
Facility's Phone: 973-444004 Kearny NJ 07032								
9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. R2, UN1993, Waste Flammable liquids, n.o.s. (D001, F003), 3, PG-II		1	TT	1322	G	D001	F003
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information Profiles: (1)173081066 - Order#: 171130 - Note								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name ALEX ANNENKOV					Signature [Signature]		Month Day Year 01 26 13	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name ALEX ANNENKOV					Signature [Signature]		Month Day Year 01 26 13	
Transporter 2 Printed/Typed Name					Signature		Month Day Year 01 26 13	
18. Discrepancy								
18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Rec'd: 1300 gallons								
18b. Alternate Facility (or Generator)					Manifest Reference Number: _____ U.S. EPA ID Number			
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)					Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H141			2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest export as noted in Item 18a								
Printed/Typed Name Bernice Mills					Signature [Signature]		Month Day Year 01 26 13	

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of		3. Emergency Response Phone		4. Manifest Tracking Number		
								016793801 JJK		
GENERATOR		5. Generator's Name and Mailing Address				Generator's Site Address (if different than mailing address)				
TRANSPORTER INT'L		6. Transporter 1 Company Name				U.S. EPA ID Number				
DESIGNATED FACILITY		7. Transporter 2 Company Name				U.S. EPA ID Number				
DESIGNATED FACILITY		8. Designated Facility Name and Site Address				U.S. EPA ID Number				
DESIGNATED FACILITY		Facility's Phone:								
DESIGNATED FACILITY		9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						No.	Type			
DESIGNATED FACILITY						XX		500	Y.	
DESIGNATED FACILITY						XX		100	L.	
DESIGNATED FACILITY										
DESIGNATED FACILITY										
DESIGNATED FACILITY		14. Special Handling Instructions and Additional Information								
DESIGNATED FACILITY		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
		DESIGNATED FACILITY		Generator's/Officer's Printed/Typed Name				Signature		Month Day Year
						11/17				
DESIGNATED FACILITY		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:								
		Transporter signature (for exports only):								
DESIGNATED FACILITY		17. Transporter Acknowledgment of Receipt of Materials								
		Transporter 1 Printed/Typed Name				Signature		Month Day Year		
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name				Signature		Month Day Year		
DESIGNATED FACILITY		18. Discrepancy								
		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
DESIGNATED FACILITY		Manifest Reference Number:								
DESIGNATED FACILITY		18b. Alternate Facility (or Generator)				U.S. EPA ID Number				
DESIGNATED FACILITY		Facility's Phone:								
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator)				Month Day Year				
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
		1.		2.		3.		4.		
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
		Printed/Typed Name				Signature		Month Day Year		
DESIGNATED FACILITY										

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002244517	2. Page 1 of 1	3. Emergency Response Phone (877) 577-2669	4. Manifest Tracking Number 016793801 JJK		
5. Generator's Name and Mailing Address Troy Chemical 1 Avenue L Newark NJ 07105 Generator's Phone: (908) 406-8280			Generator's Site Address (if different than mailing address) Troy Chemical 1 Russo Place Berkeley Heights NJ 07922				
6. Transporter 1 Company Name Deponal Consultant Services			U.S. EPA ID Number NJ000063677				
7. Transporter 2 Company Name Republic Env Sys (PA) LLC			U.S. EPA ID Number PA0085690592				
8. Designated Facility Name and Site Address REPUBLIC ENV SYS (PA) LLC 2863 Sandstone Drive HATFIELD, PA 19340 (215) 822-8895 Facility's Phone:			U.S. EPA ID Number PA0085690592				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		1. UN1228 WASTE METHANOL (80 (CER), F003) 7 PG11 (A010001, F003)	XX2	DM DF	500	P.	0001 F003
		2. UN1228 WASTE FLAMMABLE SOLIDS, ORGANIC, N.O.S. (METHANOL) 4.1 PG11 (A010001)	XX3	DM	2500	P.	0001 F003
		3.					
		4.					
14. Special Handling Instructions and Additional Information (1) 020022-00 - ENGL(11) METHANOL (2) 020026-00 - ENGL(13) METHANOL BEARIS 1 = 2X55g 2 = 8X55g Plate: 200001ne Drum: 4P2534							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name Joe Parisi			Signature [Signature]			Month Day Year 1 31 17	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter signature (for exports only): _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Yasin Wright			Signature [Signature]		Month Day Year 1 31 17	
	Transporter 2 Printed/Typed Name Norman K. [unclear]			Signature [Signature]		Month Day Year 1 31 17	
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number	
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator)					Month Day Year	
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. #141	2. #141	3.	4.			
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name [Signature]			Signature [Signature]		Month Day Year 1 31 17	

Please print or type. (Form designed for use on elite (12-pitch) typewriter)

Form Approved. OMB No. 2050-0039

D5829

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD002144517	2. Page 1 of 1	3. Emergency Response Phone 908-354-0210	4. Manifest Tracking Number 018892352 JJK	
5. Generator's Name and Mailing Address TROY CHEMICAL ONE AVENUE L NEWARK, NJ 07196 9735892500			Generator's Site Address (if different than mailing address)			
6. Generator's Phone:						
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL			U.S. EPA ID Number NJR000040667			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM, INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 908-355-5800			U.S. EPA ID Number NJD002200046			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. UN1993 Waste Flammable liquids, n.o.s. (4-4- DIMETHYLOXAZOLIDINE) 3 PG II	04 DF		2000	P	D001
X	2. UN2213 Paraformaldehyde 4.1 PG III	01 CF		2200	P	27
X	3. UN2401 Waste Monoethanolamine 8 PG III					D002
	4.					
14. Special Handling Instructions and Additional Information Document D5829 Sales Order 4861						
1) Profile#R100-33 MERGAL 186 DOT ERG#128 2) Profile#R102-2 PARAFORMALDEHYDE DOT ERG#133 3) Profile#R100-81 MONOETHANOLAMINE DOT ERG#153						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name WILLIAM REILLEY		Signature <i>William Reilly</i>		Month Day Year 9/12/18		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name John W. Rie		Signature <i>John W. Rie</i>		Month Day Year 9/12/18		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication: Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H141		2. H141		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name V Joseph		Signature <i>V. Joseph</i>		Month Day Year 9/12/18		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number	
		NJ0002144517	1	908 354-4300	018892352 JJK	
5. Generator's Name and Mailing Address		Generator's Site Address (if different than mailing address)				
INCOY CHEMICAL ONE AVENUE L NEWARK NJ 07102						
Generator's Phone: 908 354-4300						
6. Transporter 1 Company Name		U.S. EPA ID Number				
Monsieur Environmental		NJR000040667				
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address		U.S. EPA ID Number				
CYCLE CHEM. INC. 217 SOUTH FIRST STREET ELIZABETH NJ 07208		NJ0002200046				
Facility's Phone: 908 354-4300						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
X	1. 31520 Waste Flammable liquids, n.s.s. (4.4) DIMETHYLOXACETALDING) 3 POH	04	DF	2000	P	0001
X	2. 31213 Paraformaldehyde 4.1 PG II	01	CF	2200	P	37
X	3. 31520 Waste Flammable liquids, n.s.s. (4.4) DIMETHYLOXACETALDING) 3 POH					
	4.					
14. Special Handling Instructions and Additional Information Document D0829 Sites Code 4501						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name		Signature			Month	Day Year
William Reilly		William Reilly			7	12 18
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature			Month	Day Year
John W. Piro		John W. Piro			7	12 18
Transporter 2 Printed/Typed Name		Signature			Month	Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: U.S. EPA ID Number						
18b. Alternate Facility (or Generator)						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature			Month	Day Year



LAND DISPOSAL RESTRICTION NOTIFICATION AND CERTIFICATION FORM

GENERATOR NAME: TROY CHEMICAL
EPA ID NUMBER: NJD002144517

MANIFEST TRACKING NUMBER: D5829
MANIFEST DOCUMENT NO. 018892352JJK
WORK ORDER: 4861

The EPA hazardous wastes identified below must be treated to applicable treatment standards set forth in 40 CFR 268.40.

LINE	APPROVAL NO.	EPA WASTE NO.(S)	WW	UHC'S
1	R100-33	D001	NO	
3	R100-81	D002	NO	

I certify and warrant that the information that appears on this form, and appended documents, is true and correct. I have correctly indicated how my waste is to be managed in accordance with 40 CFR 268. My certification is based on personal examination of the information submitted, or based on my inquiries of those individuals responsible for obtaining the information.

Authorized Signature _____ Title _____ Date _____

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJ0002144317	2. Page 1 of 1	3. Emergency Response Phone 908-361-0110	4. Manifest Tracking Number 018992353 JJK					
5. Generator's Name and Mailing Address LYOLE CHEMICAL ONE AVENUE L NEWARK, NJ 07102 Generator's Phone: 973-589-2540		Generator's Site Address (if different than mailing address)								
6. Transporter 1 Company Name MONARCH ENVIRONMENTAL		U.S. EPA ID Number NJR000040667								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address LYOLE CHEM INC 217 SOUTH FIRST STREET ELIZABETH, NJ 07208 Facility's Phone: 908-365-5000		U.S. EPA ID Number NJ0002700048								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
	X	1. 100% WASTE FLAMMABLE LIQUIDS, P.O.S. (ACETONE) 3 PG+H2	07DM	1400	P		1001	F001 F005		
	X	2. 100% WASTE CORROSIVE LIQUID BASIC, ORGANIC, P.O.S. (SODIUM HYDROXIDE) 3 PG+H2	01DF	500	P		1002			
		3.								
		4.								
14. Special Handling Instructions and Additional Information FRAGILE DANGEROUS SWIFT-CORR 40GT 100% WASTE FLAMMABLE LIQUIDS, P.O.S. (ACETONE) 3 PG+H2 100% WASTE CORROSIVE LIQUID BASIC, ORGANIC, P.O.S. (SODIUM HYDROXIDE) 3 PG+H2										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offeror's Printed/Typed Name WILLIAM REILLEY			Signature William Reilly			Month 9	Day 12	Year 18		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input checked="" type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name JANIS W. SPOON			Signature Janis Spooner			Month 7	Day 12	Year 18	
	Transporter 2 Printed/Typed Name			Signature			Month	Day	Year	
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number:									
18b. Alternate Facility (or Generator)						U.S. EPA ID Number				
Facility's Phone:										
18c. Signature of Alternate Facility (or Generator)							Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1.		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name				Signature				Month	Day	Year



LAND DISPOSAL RESTRICTION NOTIFICATION AND CERTIFICATION FORM

GENERATOR NAME: TROY CHEMICAL
EPA ID NUMBER: NJD002144517

MANIFEST TRACKING NUMBER: D5828
MANIFEST DOCUMENT NO. 018892353JJK
WORK ORDER: 4861

The EPA hazardous wastes identified below must be treated to applicable treatment standards set forth in 40 CFR 268.40.

LINE	APPROVAL NO.	EPA WASTE NO.(S)	WW	UHC'S
1	FM1-1	D001, F003, F005	NO	
2	TWD-27	D002	NO	% FREE LIQUIDS, DESCRIPTION, DUMPABLE, PUMPABLE

I certify and warrant that the information that appears on this form, and appended documents, is true and correct. I have correctly indicated how my waste is to be managed in accordance with 40 CFR 268. My certification is based on personal examination of the information submitted, or based on my inquiries of those individuals responsible for obtaining the information.

Authorized Signature _____ Title _____ Date _____

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Material Profile Sheet Generator Number:-1 Product Code: Sales Code:
--	--	---	--

A. Generator Information

Generator Name	TROY CHEMICAL			Generator USEPA ID	NJD 002 144 517		
Mailing Address	ONE AVENUE L, NEWARK NJ 071'96						
Site Address	SAME						
Generator Contact	BILL REILLEY			Phone #	973-589-2500		Fax #
Billing Address	Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098						
Billing Contact	John Lazarus			Phone #	856-769-9022		Fax # 856-769-8740

Name of Waste	TROYSOL S367			Process Generating Waste	Off Spec / damaged		
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B. Physical Characteristics of Waste

Color/Physical Description: Varies				Specific Gravity: 0.95-0.97			
Strong Incidental Odor Present?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Physical State @ 70°:							
<input checked="" type="checkbox"/> Single Phase	<input type="checkbox"/> Multilayered	<input type="checkbox"/> Solid	<input type="checkbox"/> Semi-solid	<input type="checkbox"/> Gas/Aerosol	Loose Pack		
<input type="checkbox"/> Bi-layered	<input type="checkbox"/> Powder	<input type="checkbox"/> Liquid	<input type="checkbox"/> Sludge	<input type="checkbox"/> Lab Pack			
% Sludge	% Suspended solids	% Solid/Debris	0%	% Free Liquids	100%		
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pourable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input checked="" type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200° <input type="checkbox"/> No Flash <input type="checkbox"/> Exact							
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact							

C. Shipping Information

Quantity: 0-5	Units: Drums
Price:	
Container : 55 gallon	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Maximum
TROYSOL S367 100%	
Contains: Naptha 10-20%	
1-butoxy 2 propanol <10%	
Solvent Naptha <5%	
1,2,4 Trimethyl benzene <3%	
2-Ethylhexanoic Acid <3%	
SDS ATTACHED	

F. Regulatory Information

EPA Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	USEPA Code(s): D001
Applicable Subcategories:	
State Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	State Code(s): D001
D.O.T. Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Proper Shipping Name: WASTE FLAMMABLE LIQUIDS, N.O.S. (Naptha, 1-butoxy 2propanol)
Class: 3	I.D. NO: UN1993
	P.G.: III
	R.Q.: D001/100
	lbs

G. Special Handling Consideration

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>
<input checked="" type="checkbox"/> * None		VOC's	<input type="checkbox"/>

- ☐ Is this waste characteristically hazardous (EPA Waste Codes D004-D043):
- ☐ Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(1) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE:

Bill Ralley

TITLE:

*ENVIRONMENTAL
MANAGER*

DATE:

1/18/19

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562		550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Material Profile Sheet Generator Number: -1 Product Code: Sales Code:
--	--	--	---	---

A. Generator Information

Generator Name	TROY CHEMICAL		Generator USEPA ID	NJD 002 144 517	
Mailing Address	ONE AVENUE L, NEWARK NJ 071'96				
Site Address	SAME				
Generator Contact	BILL REILLEY	Phone #	973-589-2500	Fax #	
Billing Address	Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098				
Billing Contact	John Lazarus	Phone #	856-769-9022	Fax #	856-769-8740

Name of Waste	TETRA GUN BLUE AND RUST REMOVER	Process Generating Waste	Off Spec / damaged
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B. Physical Characteristics of Waste

Color/Physical Description: <u>Varies</u>	Specific Gravity: <u>1.19-1.24</u>
Strong Incidental Odor Present: <input type="checkbox"/> Yes <input type="checkbox"/> No	Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical State @ 70°:	
<input checked="" type="checkbox"/> Single Phase <input type="checkbox"/> Bi-layered	<input type="checkbox"/> Multilayered <input type="checkbox"/> Powder
<input type="checkbox"/> Solid <input type="checkbox"/> Liquid	<input type="checkbox"/> Semi-solid <input type="checkbox"/> Sludge
<input type="checkbox"/> Gas/Aerosol <input type="checkbox"/> Lab Pack	<input type="checkbox"/> Loose Pack
% Sludge _____	% Suspended solids _____
% Solid/Debris <u>0%</u>	% Free Liquids <u>100%</u>
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Pourable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input checked="" type="checkbox"/> >200°	<input type="checkbox"/> No Flash <input type="checkbox"/> Exact _____
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
pH: <input checked="" type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5	<input type="checkbox"/> Exact _____

C. Shipping Information

Quantity: <u>0-5</u>	Units: <u>Drums</u>
Price: _____	
Container: <u>55</u> gallon	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
TETRA GUN BLUE AND RUST REMOVER	<u>100%</u>	
Contains: Phosphoric acid	25-50%	
1-methoxy-2-propanol	5-10%	
Sulphuric acid	5-10%	
(2-methoxy-methylethoxy) propanol	5-10%	
Oxalic acid	<3%	
SDS ATTACHED		

F. Regulatory Information

EPA Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	USEPA Code(s): <u>D002</u>
Applicable Subcategories:	
State Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	State Code(s): <u>D002</u>
D.O.T. Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Proper Shipping Name: <u>WASTE CORROSIVE LIQUIDS, ACIDIC, ORGANIC N.O.S. (phosphoric acid, sulphuric acid)</u>
Class: <u>3</u>	I.D. NO: <u>UN3265</u>
P.G.: <u>II</u>	R.Q.: <u>D002/</u>

G. Special Handling Consideration

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at concentrations exceeding the UTS treatment standards? If yes, list In section C.
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>	
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>	
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>	
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>	
<input checked="" type="checkbox"/> None		VOC's	<input type="checkbox"/>	

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the posession of the Generator has been disclosed. If CCI discovers: after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE:

Bill Bailey

TITLE:

*ENVIRONMENTAL
MANAGER*

DATE:

1/18/19

Cycle Chem, Inc
217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800
550 Industrial Dr.
Lewisberry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301



Material Profile Sheet
ACCT #6700
PROFILE NUMBER: 8828
APPROVAL CODE: WR3

A. Generator Information

Generator Name TROY CHEMICAL
Mailing Address
Site Address ONE AVENUE L NEWARK, NJ 07105
Generator Contact

Generator EPA ID NJD002144517

Phone #

Fax #

Billing Company MONARCH ENVIRONMENTAL
Billing Address 108 EAST LAKE ROAD PO BOX 330 WOODSTOWN, NJ 08098
Billing Contact

Phone #

Fax #

Name of Waste Polyphase 588

Process Generating Waste Damaged/ Out Of Date/ Off Spec

B. Physical Characteristics of Waste

Specific Gravity 1.05 pH 5.1-9

% Sludge % % Suspended Solids % % Solid/Debris % % Liquid 100
Flash Point 70 Dumpable YES Pumpable NO Pourable NO
Odor none Color varies

C. Shipping Information

Quantity 1 G
Container Spec: DM 55

D. Transport Information

CCI to Provide Transportation
Customer to Deliver to CCI
Customer to Deliver to end facility Via CCI

E. Chemical Composition

Description	(Range Total > or = 100%) or ppm	
1, 3, 5- Triazine 2, 4 Diamine	0 0	%
3- Iodo-2 Propynyl Butyl Carbamate	15 25	%
Glycol Ether	60 80	%
N-Cyclopropyl-N (Dimethylethyl) 8- Methylthio	5 15	%
Polyphase 588 Contains	0 0	%

F. Regulatory Information

EPA Hazardous Waste?: YES USEPA Code(s): D001

Applicable Subcategories:

State Regulated Waste?: NO State Code(s):

D.O.T. Hazardous Waste?: Yes Proper Shipping Name: UN1993 Waste Flammable liquids, n.o.s. (GLYCOL ETHER) 3 PG III

Hazard Class/Division #: 3 UN/NA #: UN1993 Packing Group: III RQ:

G. Other Hazardous Characteristics

RCRA Reactive
Radioactive
Etiological
TSCA Regulated
Pyrophoric

Water Reactive
Subject to Subart FF Benzene
Oxidizer
Explosive

PCB's
Cyanides
Phenolics
Sulfides
VOC's

☐ Is this waste characteristically hazardous
(EPA Waste Codes D004-D043)
☐ Does this waste contain underlying
hazardous constituents as defined in 40 CFR
268(2)(I) at concentrations exceeding the UTS
treatment standards? If yes, list in Section E

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the generator and coordinate the return of the non-conforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such non-conforming waste to point of origin or to such other location designated by generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilly TITLE: ENVIRONMENTAL MANAGER DATE: 7/9/19

ACV Approval:

Printed Name

Signature:

Date:

Form Code

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271
Material Profile Sheet Generator Number:-1 Product Code: Sales Code:		

A. Generator Information

Generator Name	TROY CHEMICAL	Generator USEPA ID	NJD002144517
Mailing Address	ONE AVENUE L, NEWARK NJ 07105		
Site Address	SAME		
Generator Contact	Bill Reilley	Phone #	973-589-2500 Fax #
Billing Address	Environmental Recovery Corporation 1076 Old Manheim Pike Lancaster, PA 17601		
Billing Contact	Kait Robertson	Phone #	717-393-2627 Fax #

Name of Waste	Refrigerators
Process Generating Waste	Site Clean-up

B. Physical Characteristics of Waste

Color/Physical Description: Varies		Specific Gravity: 1.1	
Strong Incidental Odor Present?: <input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No		Wastewater?: <input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No	
Physical State @ 70°:			
<input type="checkbox"/> Single Phase	<input type="checkbox"/> Multilayered	<input type="checkbox"/> Solid	<input type="checkbox"/> Semi-solid
<input type="checkbox"/> Bi-layered	<input type="checkbox"/> Powder	<input type="checkbox"/> Liquid	<input type="checkbox"/> Sludge
		<input type="checkbox"/> Gas/Aerosol	* <input checked="" type="checkbox"/> Loose Pack
		<input type="checkbox"/> Lab Pack	
% Sludge	% Suspended solids	% Solid/Debris	100% % Free Liquids
Dumpable: * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pumpable: <input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No	Pourable: <input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No	
Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200° * <input checked="" type="checkbox"/> No Flash <input type="checkbox"/> Exact			
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 * <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact			

C. Shipping Information

Quantity: _____	Units: Boxes
Price: _____	
Container : _____	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
* <input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
Refrigerators	100%	

F. Regulatory Information

EPA Hazardous Waste?: <input type="checkbox"/> Yes * <input checked="" type="checkbox"/> No	USEPA Code(s): _____
Applicable Subcategories: _____	
State Hazardous Waste?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	State Code(s): _____
D.O.T. Hazardous Waste?: * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Proper Shipping Name: Universal Waste – Non-RCRA/non-DOT Regulated	
Class: _____	I.D. NO: _____ P.G.: _____ R.Q.: _____

G. Special Handling Considerations

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Etiological <input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Pyrophoric <input checked="" type="checkbox"/> None	<input type="checkbox"/> Water Reactive <input type="checkbox"/> Subject to Subpart FF Benzene <input type="checkbox"/> Oxidizing <input type="checkbox"/> Explosive	PCB's <input type="checkbox"/> Cyanides <input type="checkbox"/> Phenolics <input type="checkbox"/> Sulfides <input type="checkbox"/> VOC's <input type="checkbox"/>	None <input type="checkbox"/> Actual _____ _____ _____ _____	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.
--	---	--	--	--

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

 AUTHORIZED SIGNATURE: *Wm Reilley*

TITLE: Environmental Manager

DATE: March 26, 2019

Cycle Chem, Inc.

217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800
Fax: (908) 355-0562

550 Industrial Dr.
Lewisberry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301

General Chemical

133 Leland St.
Framingham, MA 01701
Phone: (508) 872-5000
Fax: (508) 875-5271

Material Profile Sheet

Generator Number: 1
Product Code:
Sales Code:

A. Generator Information

Generator Name: TROY CHEMICAL Generator USEPA ID: NJD 002 144 517
Mailing Address: ONE AVENUE L. NEWARK NJ 07106
Site Address: SAME
Generator Contact: BILL REILLEY Phone #: 973-589-2500 Fax #:
Billing Address: Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098
Billing Contact: John Lazarus Phone #: 856-769-9022 Fax #: 856-769-8740

Name of Waste: TROYKYD C16

Process Generating Waste Off Spec / damaged

B. Physical Characteristics of Waste

Color/Physical Description: Varies
Strong Incidental Odor Present?: ☐ Yes ☐ No Wastewater?: ☐ Yes ☒ No
Physical State @ 70°:
* Single Phase ☐ Multilayered ☐ Solid ☐ Semi-solid ☐ Gas/Aerosol Loose Pack
☐ Bi-layered ☐ Powder ☐ Liquid ☐ Sludge ☐ Lab Pack
% Sludge _____ % Suspended solids _____ % Solid Debris 0% _____ % Free Liquids 100%
Dumpable: * Yes ☐ No Pumpable: * Yes ☐ No Pourable: * Yes ☐ No
Flashpoint: ☐ <70° ☐ 70-100° * 101-141° ☐ 142-200° ☐ >200° No Flash ☐ Exact _____
Ignitable Solid: ☐ Yes ☒ No
pH: ☐ <2 ☐ 2.01-5 ☐ 5.01-9 * 9.01-12.4 ☐ >12.5 ☐ Exact _____

C. Shipping Information

Quantity: 0-5 Units: Drums
Price:
Container: 55 gallon

D. Transport Information

☐ CCI/GCC to Provide Transportation
* Customer to Deliver to CCI/GCC
☐ Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description

TROYKYD C16

Contains: 4,4-dimethyl oxazolidine 68%
oxazolidine 3,4,4 trimethyl 1-3%
2-amino 2-methyl 1-propanol <2%

Range Minimum Range Maximum
100%

SDS ATTACHED

F. Regulatory Information

EPA Hazardous Waste?: ☒ Yes ☐ No USEPA Code(s): D001
Applicable Subcategories:
State Hazardous Waste?: * Yes ☐ No State Code(s): D001
D.O.T. Hazardous Waste?: * Yes ☐ No Proper Shipping Name: WASTE FLAMMABLE LIQUIDS, N.O.S. (Dimethyl oxazolidine)
Class: 3 I.D. NO: UN1993 P.G.: III R.Q.: D001/100 lbs

G. Special Handling Consideration

Project Codes:

Special Handling:

Special Handling:

Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined in 40 CFR 268(2)(1) at at concentrations exceeding the UTS treatment standards? If yes, list in section C.
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>	
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>	
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>	
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>	
* None		VOC's	<input type="checkbox"/>	

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE:

Wm Reilly

TITLE: **MANAGER ENVIRONMENTAL**

DATE: **12/20/18**

Cycle Chem, Inc
217 South First Street 550 Industrial Dr.
Elizabeth, NJ 07206 Lewisberry, PA 17339
Phone: (908) 355-5800 Phone: (717) 938-4700
Fax: (717) 938-3301



Material Profile Sheet
ACCT #6700
PROFILE NUMBER: 8901
APPROVAL CODE: FM1

A. Generator Information

Generator Name TROY CHEMICAL
Mailing Address
Site Address ONE AVENUE L NEWARK, NJ 07105
Generator Contact

Generator EPA ID NJD002144517

Phone #

Fax #

Billing Company MONARCH ENVIRONMENTAL
Billing Address 108 EAST LAKE ROAD PO BOX 330 WOODSTOWN, NJ 08098
Billing Contact

Phone #

Fax #

Name of Waste Troymax Manganese 9

Process Generating Waste Contaminated Damaged Out Of Date Obsolete

B. Physical Characteristics of Waste

Specific Gravity none pH 1.02

% Sludge % % Suspended Solids % % Solid/Debris % % Liquid 100

Flash Point 70 Dumpable YES Pumpable NO Pourable NO

Odor none Color varies

E. Chemical Composition

Description	(Range Total > or = 100%) or ppm	
2-Ethylhexanoic Acid	1 3	%
Glycol Ether	1 3	%
Hydrosulfurized Heavy Naptha	30 50	%
Manganese 2, Ethylhexanpate	50 70	%
Troy max Manganese Contains	100 0	%

C. Shipping Information

Quantity 1 G
Container Spec: DM 55

D. Transport Information

CCI to Provide Transportation
Customer to Deliver to CCI
Customer to Deliver to end facility Via CCI

F. Regulatory Information

EPA Hazardous Waste?: YES USEPA Code(s): D001

Applicable Subcategories:

State Regulated Waste?: NO State Code(s):

D.O.T. Hazardous Waste?: Yes Proper Shipping Name: UN1993 Waste Flammable liquids, n.o.s. (HYDROSULFERIZED HEAVY NAPHTHA) 3 **PAIII**

Hazard Class/Division #: 3 UN / NA #: UN1993 Packing Group: III RQ:

G. Other Hazardous Characteristics

RCRA Reactive
Radioactive
Etiological
TSCA Regulated
Pyrophoric

Water Reactive
Subject to Subart FF Benzene
Oxidizer
Explosive

PCB's
Cyanides
Phenolics
Sulfides
VOC's

- ☐ Is this waste characteristically hazardous (EPA Waste Codes D004-D043)
☐ Does this waste contain underlying hazardous constituents as defined in 40 CFR 268(2)(I) at concentrations exceeding the UTS treatment standards? If yes, list in Section E

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the generator and coordinate the return of the non-conforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such non-conforming waste to point of origin or to such other location designated by generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE:

Wm. Reilly

TITLE:

ENVIRONMENTAL
MANAGER

DATE:

7/9/19

ACV Approval

Printed Name

Signature:

Date:

Form Code:

Cycle Chem, Inc.

217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800
Fax: (908) 355-0562

550 Industrial Dr.
Lewisherry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301

General Chemical
133 Leland St.
Framingham, MA 01701
Phone: (508) 872-5000
Fax: (508) 875-5271

Material Profile Sheet
Generator Number: -1
Product Code:
Sales Code:

A. Generator Information

Generator Name	TROY CHEMICAL	Generator USEPA ID	NJD 002 144 517
Mailing Address	ONE AVENUE L, NEWARK NJ 07196		
Site Address	SAME		
Generator Contact	BILL REILLEY	Phone #	973-589-2500 Fax #
Billing Address	Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098		
Billing Contact	John Lazarus	Phone #	856-769-9022 Fax # 856-769-8740
Name of Waste	METHANOL	Process Generating Waste	SPENT METHANOL

B. Physical Characteristics of Waste

Color/Physical Description: Varies	Specific Gravity: 0.79-0.8
Strong Incidental Odor Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical State at 70°:	
<input checked="" type="checkbox"/> Single Phase <input type="checkbox"/> Multilayered <input type="checkbox"/> Solid	<input type="checkbox"/> Gas Aerosol Loose Pack
<input type="checkbox"/> Bi-layered <input type="checkbox"/> Powder <input type="checkbox"/> Liquid	<input type="checkbox"/> Sludge <input type="checkbox"/> Lab Pack
% Sludge _____ % Suspended solids _____	% Solid Debris 0% _____ % Free Liquids 100% _____
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Flashpoint: <input checked="" type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200°	No Flash <input type="checkbox"/> Exact _____
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact _____	

C. Shipping Information

Quantity: 28,000 Units: GALLONS
Price:
Container: BULK

D. Transport Information

☐ CCI/GCC to Provide Transportation
☒ Customer to Deliver to CCI/GCC
☐ Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	
METHANOL cas:67-56-1	Range Minimum Range Maximum
WATER	98-99%
SDS ATTACHED	1-2%

F. Regulatory Information

EPA Hazardous Waste? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	USEPA Code(s): F003, D001
Applicable Subcategories:	
State Hazardous Waste? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	State Code(s): F003, D001
D.O.T. Hazardous Waste? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Proper Shipping Name: WASTE METHANOL
Class: 3, (6.1)	I.D. NO: UN1230 P.G.: II R.Q.: 5,000lbs

G. Special Handling Consideration

Project Codes:	
Special Handling:	
Special Handling:	
Special Pricing:	

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Water Reactive	PCB's <input type="checkbox"/> None <input type="checkbox"/> Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043)? <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined in 40 CFR 268.2(d) at concentrations exceeding the UTS treatment standards? If yes, list in section C.
<input type="checkbox"/> Radioactive <input type="checkbox"/> Subject to Subpart	Cyanides <input type="checkbox"/>	
<input type="checkbox"/> Etiological <input type="checkbox"/> HF Benzene	Phenolics <input type="checkbox"/>	
<input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Oxidizing	Sulfides <input type="checkbox"/>	
<input type="checkbox"/> Pyrophoric <input type="checkbox"/> Explosive	VOC's <input type="checkbox"/>	
<input checked="" type="checkbox"/> None		

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AUTHORIZED SIGNATURE:

Wm Reilly

MANAGER

TITLE: ENVIRONMENTAL

DATE: 1/7/19

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Material Profile Sheet Generator Number:-1 Product Code: Sales Code:
--	--	---	--

A. Generator Information

Generator Name	TROY CHEMICAL	Generator USEPA ID	NJD 002144517
Mailing Address	ONE AVENUE L, NEWARK NJ 07105		
Site Address	SAME		
Generator Contact	Bill Reilley	Phone #	973-589-2500 Fax #
Billing Address	Environmental Recovery Corporation 1076 Old Manheim Pike Lancaster, PA 17601		
Billing Contact	Kait Robertson	Phone #	717-393-2627 Fax #

Name of Waste	Process Generating Waste
Air Conditioners	Site Clean-up

B. Physical Characteristics of Waste

Color/Physical Description: <u>Varies</u>		Specific Gravity: <u>1.1</u>	
Strong Incidental Odor Present?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Physical State @ 70°:			
<input type="checkbox"/> Single Phase	<input type="checkbox"/> Multilayered	<input type="checkbox"/> Solid	<input type="checkbox"/> Semi-solid
<input type="checkbox"/> Bi-layered	<input type="checkbox"/> Powder	<input type="checkbox"/> Liquid	<input type="checkbox"/> Sludge
		<input type="checkbox"/> Gas/Aerosol	<input checked="" type="checkbox"/> Loose Pack
		<input type="checkbox"/> Lab Pack	
% Sludge	% Suspended solids	% Solid/Debris	100%
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Pumpable: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Pourable: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200° <input checked="" type="checkbox"/> No Flash <input type="checkbox"/> Exact			
Ignitable Solid: <input type="checkbox"/> Yes <input type="checkbox"/> No			
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact			

C. Shipping Information

Quantity: _____	Units: <u>Boxes</u>
Price: _____	
Container: _____	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
Air Conditioners	100%	

F. Regulatory Information

EPA Hazardous Waste?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	USEPA Code(s): _____
Applicable Subcategories: _____	
State Hazardous Waste?: <input type="checkbox"/> Yes <input type="checkbox"/> No	State Code(s): _____
D.O.T. Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Proper Shipping Name: <u>Universal Waste – Non-RCRA/non-DOT Regulated</u>	
Class: _____	I.D. NO: _____ P.G.: _____ R.Q.: _____

G. Special Handling Considerations

Project Codes: _____

Special Handling: _____

Special Handling: _____

Special Pricing: _____

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>	
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>	
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>	
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>	
<input checked="" type="checkbox"/> None		VOC's	<input type="checkbox"/>	

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 AUTHORIZED SIGNATURE: Wm Reilley

TITLE: Environmental Manager

DATE: March 26, 2019

217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Generator Number: -1 Product Code: _____ Sales Code: _____
---	--	--	---

A. Generator Information

Generator Name <u>TROY CHEMICAL</u>	Generator USEPA ID <u>NJD 002 144 517</u>
Mailing Address <u>ONE AVENUE L, NEWARK NJ 071'96</u>	
Site Address <u>SAME</u>	
Generator Contact <u>BILL REILLEY</u>	Phone # <u>973-589-2500</u> Fax # _____
Billing Address <u>Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098</u>	
Billing Contact <u>John Lazarus</u>	Phone # <u>856-769-9022</u> Fax # <u>856-769-8740</u>

Name of Waste <u>METHANOL and WATER</u>	Process Generating Waste <u>SPENT METHANOL</u>
---	--

B. Physical Characteristics of Waste

Color/Physical Description: <u>Varies</u>		Specific Gravity: <u>0.79-0.9</u>	
Strong Incidental Odor Present?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Physical State @ 70°:			
<input checked="" type="checkbox"/> Single Phase	<input type="checkbox"/> Multilayered	<input type="checkbox"/> Solid	<input type="checkbox"/> Semi-solid
<input type="checkbox"/> Bi-layered	<input type="checkbox"/> Powder	<input checked="" type="checkbox"/> Liquid	<input type="checkbox"/> Sludge
		<input type="checkbox"/> Gas/Aerosol	<input type="checkbox"/> Loose Pack
		<input type="checkbox"/> Lab Pack	
% Sludge _____ % Suspended solids _____		% Solid/Debris <u>0%</u> % Free Liquids <u>100%</u>	
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Flashpoint: <input checked="" type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200°		No Flash <input type="checkbox"/> Exact _____	
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5		<input type="checkbox"/> Exact _____	

C. Shipping Information

Quantity: <u>0-14</u>	Units: <u>TOTES</u>
Price: _____	
Container: <u>TOTES/DRUMS</u>	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
METHANOL cas:67-56-1	<u>80%</u>	
WATER	<u>20%</u>	
SDS ATTACHED		

F. Regulatory Information

EPA Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	USEPA Code(s): <u>F003, D001</u>
Applicable Subcategories: _____	
State Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	State Code(s): <u>F003, D001</u>
D.O.T. Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Proper Shipping Name: <u>WASTE METHANOL</u>	
Class: <u>3, (6.1)</u>	I.D. NO: <u>UN1230</u> P.G.: <u>II</u> R.Q.: <u>5,000lbs</u>

G. Special Handling Consideration

Project Codes: _____
Special Handling: _____
Special Handling: _____
Special Pricing: _____

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Etiological <input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Pyrophoric <input checked="" type="checkbox"/> None	<input type="checkbox"/> Water Reactive <input type="checkbox"/> Subject to Subpart FF Benzene <input type="checkbox"/> Oxidizing <input type="checkbox"/> Explosive	None PCB's Cyanides Phenolics Sulfides VOC's
<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.		

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers; after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilley

TITLE: Environmental Manager

DATE: April 10, 2019

Cycle Chem, Inc
217 South First Street 550 Industrial Dr.
Elizabeth, NJ 07206 Lewisberry, PA 17339
Phone: (908) 355-5800 Phone: (717) 938-4700
Fax: (717) 938-3301



Material Profile Sheet
ACCT #6700
PROFILE NUMBER: 11352
APPROVAL CODE: XMS

A. Generator Information

Generator Name TROY CHEMICAL
Mailing Address
Site Address ONE AVENUE L NEWARK, NJ 07105
Generator Contact

Generator EPA ID NJD002144517

Phone #

Fax #

Billing Company MONARCH ENVIRONMENTAL
Billing Address 108 EAST LAKE ROAD PO BOX 330 WOODSTOWN, NJ 08098
Billing Contact

Phone #

Fax #

Name of Waste Micropel 5dotp

Process Generating Waste Obsolete Product

B. Physical Characteristics of Waste

Specific Gravity pH 5.01 9

% Sludge % % Suspended Solids % % Solid/Debris % % Liquid %
Flash Point 200 Dumpable YES Pumpable NO Pourable NO
Odor Color

C. Shipping Information

Quantity 1 DM
Container Spec: DM 55

D. Transport Information

CCI to Provide Transportation
Customer to Deliver to CCI
Customer to Deliver to end facility Via CCI

E. Chemical Composition

Description	(Range Total > or = 100%) or ppm
Alcohols Cas 68526-85-2	10 25 %
Diphenoxarsic-10-Yl-Oxide	0 5 %

F. Regulatory Information

EPA Hazardous Waste?: YES USEPA Code(s): D004

Applicable Subcategories:

State Regulated Waste?: NO State Code(s):

D.O.T. Hazardous Waste?: Yes Proper Shipping Name: UN2810 Waste Toxic, liquids, organic, n.o.s.(10,10' Oxybisphenoxarsine) 6.1 PG II

Hazard Class/Division #: 6.1 UN / NA #: UN2810 Packing Group: II RQ:

G. Other Hazardous Characteristics

RCRA Reactive
Radioactive
Etiological
TSCA Regulated
Pyrophoric

Water Reactive
Subject to Subart FF Benzene
Oxidizer
Explosive

PCB's
Cyanides
Phenolics
Sulfides
VOC's

☒ Is this waste characteristically hazardous (EPA Waste Codes D004-D043)
☐ Does this waste contain underlying hazardous constituents as defined in 40 CFR 268(2)(I) at concentrations exceeding the UTS treatment standards? If yes, list in Section E

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the generator and coordinate the return of the non-conforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such non-conforming waste to point of origin or to such other location designated by generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE: Wm Bailey

TITLE: ENVIRONMENTAL MANAGER

DATE: 7/9/19

ACV Approval:

Printed Name

Signature

Date:

Form Code:

Cycle Chem, Inc

217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800

550 Industrial Dr.
Lewisberry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301

**Material Profile Sheet**

ACCT #6700
PROFILE NUMBER: 52807
APPROVAL CODE: INC

A. Generator Information

Generator Name TROY CHEMICAL Generator EPA ID NJD002144517
Mailing Address
Site Address ONE AVENUE L NEWARK, NJ 07105
Generator Contact ED CAPASSO Phone # Fax #
Billing Company MONARCH ENVIRONMENTAL
Billing Address 108 EAST LAKE ROAD PO BOX 330 WOODSTOWN, NJ 08098
Billing Contact PAUL MOLNAR Phone # 800-220-3478 Fax #

Name of Waste N-Butyl Isocyanate

Process Generating Waste Unused Product

B. Physical Characteristics of Waste

Specific Gravity 0.89 pH NA
% Sludge = 0 % % Suspended Solids = 0 % % Solid/Debris = 0 % % Liquid 100 = %
Flash Point 52 Dumpable YES Pumpable YES Pourable YES
Odor characteristic Color yellow/green

C. Shipping Information

Quantity
Container Spec: DM 85

D. Transport Information

☐ CCI to Provide Transportation
☐ Customer to Deliver to CCI
☐ Customer to Deliver to end facility Via CCI

E. Chemical Composition

Description (Range Total > or = 100%) or ppm

N-Butyl Isocyanate

100 = %

F. Regulatory Information

EPA Hazardous Waste?: YES USEPA Code(s): D001; D003
Applicable Subcategories:
State Regulated Waste?: NO State Code(s):
D.O.T. Hazardous Waste?: Proper Shipping Name: RQ, UN2485, Waste n-Butyl isocyanate, 6.1 (3), I, Poison Inhalation Hazard Zone B
Hazard Class/Division #: 6.1 UN / NA #: UN2485 Packing Group: I RQ:

G. Other Hazardous Characteristics

☐ RCRA Reactive
☐ Radioactive
☐ Etiological
☐ TSCA Regulated
☐ Pyrophoric

☒ Water Reactive
☐ Subject to Subart FF Benzene
☐ Oxidizer
☐ Explosive

☐ PCB's
☐ Cyanides
☐ Phenolics
☐ Sulfides
☐ VOC's

☐ Is this waste characteristically hazardous (EPA Waste Codes D004-D043)
☐ Does this waste contain underlying hazardous constituents as defined in 40 CFR 268(2)(I) at concentrations exceeding the UTS treatment standards? If yes, list in Section E

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the generator and coordinate the return of the non-conforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such non-conforming waste to point of origin or to such other location designated by generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilly TITLE: MANAGER - ENVIRONMENTAL DATE: 12/12/18

Cycle Chemical, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Generator Number: <u>1</u> Product Code: _____ Sales Code: _____
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A. Generator Information

Generator Name	TROY CHEMICAL	Generator USEPA ID	NJD 002 144 517
Mailing Address	ONE AVENUE L, NEWARK NJ 07106		
Site Address	SAME		
Generator Contact	BILL REILLEY	Phone #	973-589-2500
		Fax #	
Billing Address	Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098		
Billing Contact	John Lazarus	Phone #	856-769-9022
		Fax #	856-769-8740

Name of Waste	Pilot Plant Dispersion
Process Generating Waste	Pilot Plant

B. Physical Characteristics of Waste

Color/Physical Description: <u>White viscous liquid</u>		Specific Gravity: <u>1.0-1.2</u>	
Strong Incidental Odor Present?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Physical State @ 70°:			
<input type="checkbox"/> Single Phase	<input type="checkbox"/> Multilayered	<input type="checkbox"/> Solid	<input type="checkbox"/> Semi-solid
<input type="checkbox"/> Bi-layered	<input type="checkbox"/> Powder	<input checked="" type="checkbox"/> Liquid	<input checked="" type="checkbox"/> Sludge
		<input type="checkbox"/> Gas/Aerosol	<input type="checkbox"/> Loose Pack
		<input type="checkbox"/> Lab Pack	
% Sludge <u><20%</u> % Suspended solids _____ % Solid/Debris <u>0%</u> % Free Liquids <u>100%</u> Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Pumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Pourable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Flashpoint: <input checked="" type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input checked="" type="checkbox"/> >200° No Flash <input type="checkbox"/> Exact _____			
Ignitable Solid: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact _____			

C. Shipping Information

Quantity: <u>0-4</u>	Units: <u>Drum</u>
Price: _____	
Container : <u>HDPE DRUMS 55Gal</u>	

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC
<input checked="" type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
1-Iodo-2-Propynyl Butyl Carbamate CAS#:55406-53-6	0.0-10%	
Carbendazim CAS# 10605-21-7	0.0-4.0%	
Duiron CAS#:330-54-1	0.0-4.0%	
1,2 Benzisothiazolin – 3 (2H)-one CAS#: 002634-33-5	0.0-5.0%	
Benzenesulfonic Acid, C10-16 alkyl CAS#: 68584-24-7	0.0-1.0%	
Kaolin CAS# 1332-58-7	0.0-2.0%	
Fumed Silica CAS#: 68611-44-9	0.0-1.0%	
Xanthan gum CAS#: 11138-66-2	0.0-0.10%	
Water	50.0-90.0%	

F. Regulatory Information

EPA Hazardous Waste?:	Yes	No	USEPA Code(s):	
Applicable Subcategories:				
State Hazardous Waste?:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	State Code(s):	
D.O.T. Hazardous Waste?:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Proper Shipping Name:	
Class:	I.D. NO:	P.G.: II	R.Q.: 5,000lbs	

G. Special Handling Consideration

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Etiological <input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Pyrophoric <input checked="" type="checkbox"/> None	<input type="checkbox"/> Water Reactive <input type="checkbox"/> Subject to Subpart FF Benzene <input type="checkbox"/> Oxidizing <input type="checkbox"/> Explosive	PCB's <input type="checkbox"/> Cyanides <input type="checkbox"/> Phenolics <input type="checkbox"/> Sulfides <input type="checkbox"/> VOC's <input type="checkbox"/>
<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.		

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers; after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilley

TITLE: Environmental Manager

DATE: June 21, 2019

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562	General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271	Material Profile Sheet Generator Number:-1 Product Code: Sales Code:
550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301		

A. Generator Information

Generator Name	TROY CHEMICAL	Generator USEPA ID	NJD 002 144 517
Mailing Address	ONE AVENUE L, NEWARK NJ 071`96		
Site Address	SAME		
Generator Contact	BILL REILLEY	Phone #	973-589-2500 Fax #
Billing Address	Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098		
Billing Contact	John Lazarus	Phone #	856-769-9022 Fax # 856-769-8740

Name of Waste	Pilot Plant BIT-Zpt-ZnO Dispersion	Process Generating Waste	Pilot Plant
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B. Physical Characteristics of Waste

Color/Physical Description: White viscous liquid	Specific Gravity: 1.0-1.2
Strong Incidental Odor Present?: * Yes No	Wastewater?: <input type="checkbox"/> Yes * No
Physical State @ 70°:	
<input type="checkbox"/> Single Phase <input type="checkbox"/> Multilayered <input type="checkbox"/> Solid <input type="checkbox"/> Semi-solid <input type="checkbox"/> Gas/Aerosol Loose Pack	
<input type="checkbox"/> Bi-layered <input type="checkbox"/> Powder <input checked="" type="checkbox"/> Liquid <input checked="" type="checkbox"/> Sludge <input type="checkbox"/> Lab Pack	
% Sludge < 20% % Suspended solids % Solid/Debris 0% % Free Liquids 100%	
Dumpable: * Yes <input type="checkbox"/> No Pumpable: * Yes No Pourable: * Yes No	
Flashpoint: * <70° <input type="checkbox"/> 70-100° 101-141° <input type="checkbox"/> 142-200° <input checked="" type="checkbox"/> >200° No Flash <input type="checkbox"/> Exact	
Ignitable Solid: <input type="checkbox"/> Yes * No	
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 x 5.01-9 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact	

C. Shipping Information

Quantity: 0-4	Units: Drum
Price:	
Container :	HDPE DRUMS 55Gal

D. Transport Information

<input type="checkbox"/> CCI/GCC to Provide Transportation
* Customer to Deliver to CCI/GCC
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
Zinc Pyrithione CAS#13463-41-7	0.0-38%	
Zinc Oxide CAS#1314-13-2	0.0-23.0%	
1,2 Benzisothiazolin – 3 (2H)-one CAS#: 002634-33-5	0.0-10.0%	
Naphthalene Condensate CAS#9084-06-4	0.0-3.0%	
Benzenesulfonic Acid, C10-16 alkyl CAS#: 68584-24-7	0.0-3.50%	
Xanthan gum CAS#: 11138-66-2	0.0-0.30%	
Water	60.0-90.0%	

F. Regulatory Information

EPA Hazardous Waste?:	Yes No	USEPA Code(s):
Applicable Subcategories:		
State Hazardous Waste?:	* Yes <input type="checkbox"/> No	State Code(s):
D.O.T. Hazardous Waste?:	* Yes <input type="checkbox"/> No	Proper Shipping Name:
Class:	I.D. NO:	P.G.: II R.Q.: 5,000lbs

G. Special Handling Consideration

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive <input type="checkbox"/> Water Reactive <input type="checkbox"/> Radioactive <input type="checkbox"/> Subject to Subpart <input type="checkbox"/> Etiological FF Benzene <input type="checkbox"/> TSCA Regulated <input type="checkbox"/> Oxidizing <input type="checkbox"/> Pyrophoric <input type="checkbox"/> Explosive * None	None Actual PCB's <input type="checkbox"/> Cyanides <input type="checkbox"/> Phenolics <input type="checkbox"/> Sulfides <input type="checkbox"/> VOC's <input type="checkbox"/>	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043): <input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.
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GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE: <u>Wm Reilley</u>	TITLE: <u>Environmental Manager</u>	DATE: <u>June 21, 2019</u>
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Cycle Chem, Inc.

217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800
Fax: (908) 355-0562

550 Industrial Dr.
Lewisberry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301

General Chemical

133 Leland St.
Framingham, MA 01701
Phone: (508) 872-5000
Fax: (508) 875-5271

Material Profile Sheet

Generator Number:-1
Product Code:
Sales Code:

A. Generator Information

Generator Name TROY CHEMICAL Generator USEPA ID NJD 002 144 517
Mailing Address ONE AVENUE L, NEWARK NJ 071'96
Site Address SAME
Generator Contact BILL REILLEY Phone # 973-589-2500 Fax #

Billing Address Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098
Billing Contact John Lazarus Phone # 856-769-9022 Fax # 856-769-8740

Name of Waste Pilot Plant Cobalt Waste Process Generating Waste Pilot Plant Reactor Wash

B. Physical Characteristics of Waste

Color/Physical Description: Blue liquid Specific Gravity: 1.0-1.2
Strong Incidental Odor Present?: ☒ Yes ☐ No Wastewater?: ☐ Yes ☒ No
Physical State @ 70°:
☐ Single Phase ☐ Multilayered ☐ Solid ☐ Semi-solid ☐ Gas/Aerosol Loose Pack
☐ Bi-layered ☐ Powder ☒ Liquid ☒ Sludge ☐ Lab Pack
% Sludge < 5% % Suspended solids % Solid/Debris 0% % Free Liquids 100%
Dumpable: ☒ Yes ☐ No Pumpable: ☒ Yes ☐ No Pourable: ☒ Yes ☐ No
Flashpoint: ☒ <70° ☐ 70-100° ☒ 101-141° ☐ 142-200° >200° No Flash ☐ Exact
Ignitable Solid: ☐ Yes ☒ No
pH: ☐ <2 ☐ 2.01-5 x 5.01-9 9.01-12.4 ☐ >12.5 ☐ Exact

C. Shipping Information

Quantity: 0-4 Units: Drum
Price:
Container : Steel DRUMS 55Gal

D. Transport Information

☐ CCI/GCC to Provide Transportation
☒ Customer to Deliver to CCI/GCC
☐ Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range Minimum	Range Maximum
Cobalt 2-Ethylhexanoate CAS # [136-52-7] 71.00%:	0.0-10%	
Exxsol D60 CAS # [64742-47-8] 24.60%;	88.0-98.0%	
Tripropylene Glycol Methyl Ether CAS # [25498-49-1] 3.51%	0.0-1.0%	
Propionic acid CAS # [79-09-4] 0.84 -1.7%	0.0-1.0%	

F. Regulatory Information

EPA Hazardous Waste?: Yes No USEPA Code(s):
Applicable Subcategories:
State Hazardous Waste?: ☒ Yes ☐ No State Code(s):
D.O.T. Hazardous Waste?: ☒ Yes ☐ No Proper Shipping Name:
Class: I.D. NO: P.G.: II R.Q.: 5,000lbs

G. Special Handling Consideration

Project Codes:
Special Handling:
Special Handling:
Special Pricing:

H. Other Hazardous Characteristics

<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043):
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>	<input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>	at concentrations exceeding the UTS treatment
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>	standards? If yes, list In section C.
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>	
<input checked="" type="checkbox"/> None		VOC's	<input type="checkbox"/>	

GENERATOR CERTIFICATION: I hereby certify that all information submitted in this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards in the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description on this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as set forth on the manifest or to such other locations designated in writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted as such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilley

TITLE: Environmental Manager

DATE: June 21, 2019



all material sent to ERC, NON HAZ

Waste Profile Renewal

Broker:

Monarch Environmental
PO Box 330
Woodstown, NJ 08098
John Lazarus 908-267-3991

Generator:

Troy Chemical
One Avenue L
Newark, NJ 07106

~~Ed Capasso~~ 973-589-2500 x 3340

William Reilly

Dear Generator / Customer:

This notification is required by the Waste Analysis Plan of the above named TSDf and must be repeated every 5 years for each waste stream managed by the named TSDf.

Wastestream Identification

Profile Number: 1406-02453
Approval Number: SPT
Description: INORGANIC MIX
Expiration Date: 02-JUN-19

Sign and date this original to:

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

William Reilly ENVIRONMENTAL 7/9/19
Certified By Title MANAGER Date

Please check the appropriate box below:

- ☒ RENEW WITHOUT CHANGE Sign and Return.
- ☐ RENEW WITH CHANGE Complete new profile and indicate changes in waste generating process and/or wastestream that are different from information last submitted. Sign and Return.
- ☐ CANCEL this wastestream approval. Sign and Return.

If you should have any questions, please call your broker or Sales Representative

NON-RCRA

TSDf Management: (TSDf LAB USE ONLY)

Notes:

Form Code
Inbound Code
Unit Cost
3rd Auth.

Cons. Code
Approval #
Class Code
Unit Charge

Approved ☐ Rejected ☐ Authorized By: _____ Date: _____ 2nd Auth: _____

Cycle Chem, Inc. 217 South First Street Elizabeth, NJ 07206 Phone: (908) 355-5800 Fax: (908) 355-0562		550 Industrial Dr. Lewisberry, PA 17339 Phone: (717) 938-4700 Fax: (717) 938-3301		General Chemical 133 Leland St. Framingham, MA 01701 Phone: (508) 872-5000 Fax: (508) 875-5271		Material Profile Sheet Generator Number:-1 Product Code: Sales Code:	
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A. Generator Information							
Generator Name		TROY CHEMICAL		Generator USEPA ID		NJD002144517	
Mailing Address		ONE AVENUE L, NEWARK NJ 07105					
Site Address		SAME					
Generator Contact		Bill Reilley		Phone #		973-589-2500 Fax #	
Billing Address		Environmental Recovery Corporation 1076 Old Manheim Pike Lancaster, PA 17601					
Billing Contact		Kait Robertson		Phone #		717-393-2627 Fax #	

Name of Waste		Dehumidifiers		Process Generating Waste		Site Clean-up	
B. Physical Characteristics of Waste						C. Shipping Information	
Color/Physical Description: <u>Varies</u>				Specific Gravity: <u>1.1</u>		Quantity: _____ Units: <u>Boxes</u>	
Strong Incidental Odor Present?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Wastewater?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Price: _____	
Physical State @ 70°:						Container : _____	
<input type="checkbox"/> Single Phase		<input type="checkbox"/> Multilayered		<input type="checkbox"/> Solid		<input type="checkbox"/> Semi-solid	
<input type="checkbox"/> Bi-layered		<input type="checkbox"/> Powder		<input type="checkbox"/> Liquid		<input type="checkbox"/> Sludge	
				<input type="checkbox"/> Gas/Aerosol		<input checked="" type="checkbox"/> Loose Pack	
				<input type="checkbox"/> Lab Pack			
% Sludge _____		% Suspended solids _____		% Solid/Debris <u>100%</u>		% Free Liquids _____	
Dumpable: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Pumpable: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Pourable: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Flashpoint: <input type="checkbox"/> <70° <input type="checkbox"/> 70-100° <input type="checkbox"/> 101-141° <input type="checkbox"/> 142-200° <input type="checkbox"/> >200° <input checked="" type="checkbox"/> No Flash <input type="checkbox"/> Exact _____							
Ignitable Solid: <input type="checkbox"/> Yes <input type="checkbox"/> No							
pH: <input type="checkbox"/> <2 <input type="checkbox"/> 2.01-5 <input checked="" type="checkbox"/> 5.01-9 <input type="checkbox"/> 9.01-12.4 <input type="checkbox"/> >12.5 <input type="checkbox"/> Exact _____							
D. Transport Information							
<input type="checkbox"/> CCI/GCC to Provide Transportation							
<input checked="" type="checkbox"/> Customer to Deliver to CCI/GCC							
<input type="checkbox"/> Customer to Deliver to end facility Via CCI/GCC							

E. Chemical Composition	
Description	Range Minimum Range Maximum
Dehumidifiers	100%

F. Regulatory Information	
EPA Hazardous Waste?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No USEPA Code(s): _____	
Applicable Subcategories: _____	
State Hazardous Waste?: <input type="checkbox"/> Yes <input type="checkbox"/> No State Code(s): _____	
D.O.T. Hazardous Waste?: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Proper Shipping Name: <u>Universal Waste – Non-RCRA/non-DOT Regulated</u>	
Class: _____ I.D. NO: _____ P.G.: _____ R.Q.: _____	

G. Special Handling Considerations	
Project Codes: _____	
Special Handling: _____	
Special Handling: _____	
Special Pricing: _____	

H. Other Hazardous Characteristics					
<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive	None	Actual	<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043):	
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart	PCB's	<input type="checkbox"/>	<input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at	
<input type="checkbox"/> Etiological	FF Benzene	Cyanides	<input type="checkbox"/>	at concentrations exceeding the UTS treatment	
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing	Phenolics	<input type="checkbox"/>	standards? If yes, list In section C.	
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive	Sulfides	<input type="checkbox"/>		
<input checked="" type="checkbox"/> None		VOC's	<input type="checkbox"/>		

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers; after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE: <u>Wm Reilley</u>	TITLE: <u>Environmental Manager</u>	DATE: <u>March 26, 2019</u>
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Cycle Chem, Inc.

217 South First Street
Elizabeth, NJ 07206
Phone: (908) 355-5800
Fax: (908) 355-0562

550 Industrial Dr.
Lewisberry, PA 17339
Phone: (717) 938-4700
Fax: (717) 938-3301

General Chemical

133 Leland St.
Framingham, MA 01701
Phone: (508) 872-5000
Fax: (508) 875-5271

Material Profile Sheet

Generator Number: 1
Product Code: _____
Sales Code: _____

A. Generator Information

Generator Name TROY CHEMICAL Generator USEPA ID NJD 002 144 517
Mailing Address ONE AVENUE L, NEWARK NJ 071'96
Site Address SAME
Generator Contact BILL REILLEY Phone # 973-589-2500 Fax # _____
Billing Address Monarch Environmental, 108 East Lake Road, Woodstown NJ 08098
Billing Contact John Lazarus Phone # 856-769-9022 Fax # 856-769-8740

Name of Waste FUNGITROL 11-50S Process Generating Waste Off Spec / damaged

B. Physical Characteristics of Waste

Color/Physical Description: Varies Specific Gravity: 1.14
Strong Incidental Odor Present?: ☐ Yes ☒ No Wastewater?: ☐ Yes ☒ No
Physical State @ 70°:
☒ Single Phase ☐ Multilayered ☐ Solid ☐ Semi-solid ☐ Gas/Aerosol ☐ Loose Pack
☐ Bi-layered ☐ Powder ☐ Liquid ☐ Sludge ☐ Lab Pack
% Sludge _____ % Suspended solids _____ % Solid/Debris 0% % Free Liquids 100%
Dumpable: ☒ Yes ☐ No Pumpable: ☒ Yes ☐ No Pourable: ☒ Yes ☐ No
Flashpoint: ☐ <70° ☐ 70-100° ☒ 101-141° ☐ 142-200° ☐ >200° ☐ No Flash ☐ Exact _____
Ignitable Solid: ☐ Yes ☒ No
pH: ☐ <2 ☐ 2.01-5 ☒ 5.01-9 ☐ 9.01-12.4 ☐ >12.5 ☐ Exact _____

C. Shipping Information

Quantity: 0-5 Units: Drums
Price: _____
Container: 55 gallon/ totes

D. Transport Information

☐ CCI/GCC to Provide Transportation
☒ Customer to Deliver to CCI/GCC
☐ Customer to Deliver to end facility Via CCI/GCC

E. Chemical Composition

Description	Range	Maximum
FUNGITROL 11-50S 100%		
Contains: N-(trichloromethylthio)phthalimide	52.74%	
Petroleum distillates (Stoddard type)	38%	
Petroleum distillates (hydrotreated light)	8.82%	
Methyl ethyl ketone oxime	0.34%	

SDS ATTACHED

F. Regulatory Information

EPA Hazardous Waste?: ☒ Yes ☐ No USEPA Code(s): D001
Applicable Subcategories: _____
State Hazardous Waste?: ☒ Yes ☐ No State Code(s): D001
D.O.T. Hazardous Waste?: ☒ Yes ☐ No Proper Shipping Name: WASTE FLAMMABLE LIQUIDS, N.O.S. (aliphatic petroleum distillates)
Class: 3 I.D. NO: UN1993 P.G.: III R.Q.: D001/100
lbs

G. Special Handling Consideration

Project Codes: _____
Special Handling: _____
Special Handling: _____
Special Pricing: _____

H. Other Hazardous Characteristics

	None	Actual	
<input type="checkbox"/> RCRA Reactive	<input type="checkbox"/> Water Reactive		<input type="checkbox"/> Is this waste characteristically hazardous (EPA Waste Codes D004-D043):
<input type="checkbox"/> Radioactive	<input type="checkbox"/> Subject to Subpart		
<input type="checkbox"/> Etiological	<input type="checkbox"/> FF Benzene		<input type="checkbox"/> Does this waste contain underlying hazardous constituents As defined In 40 CFR 268(2)(I) at at concentrations exceeding the UTS treatment standards? If yes, list In section C.
<input type="checkbox"/> TSCA Regulated	<input type="checkbox"/> Oxidizing		
<input type="checkbox"/> Pyrophoric	<input type="checkbox"/> Explosive		
<input checked="" type="checkbox"/> None			

GENERATOR CERTIFICATION: I hereby certify that all information submitted In this and attached documents is complete, contains true and accurate descriptions and is representative of the waste material, and that all relevant information regarding known or suspected hazards In the possession of the Generator has been disclosed. If CCI discovers, after having taken delivery of the waste, that any waste does not conform to the identification and description On this MPS then CCI shall provide notice of such condition to the Generator and coordinate the return of the nonconforming waste to the point of origin as Set forth On the manifest or to such other locations designated In writing by the Generator. Generator agrees to reimburse CCI for all handling, packaging, clean-up and transportation costs or charges, damage to equipment, and costs associated with lost time incurred by CCI during the receipt, handling, temporary storage and return of such nonconforming waste to point of origin or to such other location designated by Generator. I hereby authorize CCI to amend and/or correct any information on the MPS with the full understanding that if any amendment or correction is performed, I will be contacted As such to issue any approval.

AUTHORIZED SIGNATURE: Wm Reilly

ENVIRONMENTAL
TITLE: MANAGER

DATE: 2/4/19

Hazardous Waste Management

August 2018

HAZARDOUS WASTE MANAGEMENT ANNUAL REFRESHER - 2018

- EXAMPLES OF CONTAINER STORAGE AT OTHER COMPANIES
 - WHY IS THERE TRAINING?
 - HOW MUCH TRAINING IS NEEDED?
- REVIEW OF THE HAZARDOUS WASTE LABEL
 - WEEKLY INSPECTION LOG
- EMERGENCY SPILLS – ACTIONS TO PERFORM
 - Q & A

Safety Training: ISO 4001 Audit Related Topic

Date: August 21, 2018

Presented by: William Reiley

HAZARDOUS WASTE MANAGEMENT

TROY

Last	First	Signature	Last	First	Signature
Almonte	Carlos	Carlos Almonte	Foster	Mitchell	
Aparicio	Carlos		Goitandia	John	
Avila	Nestor	Nestor Avila	Guerrero	Jean	
Baez	Roberto	Roberto Baez	Guevarra	Elmer	
Baquiran	Rogelio	Rogelio Baquiran	Holden	Abdul	
Blanch	Patrick	Patrick Blanch	Jeffers	Alan	
Boykins	Ben		Johnson	Kevin	
Burbano	Ivan	Ivan Burbano	Johnson	Shakir	
Cadena	Arturo	Arturo Cadena	Laing	Tason	
Caldwell	Micah		Leano	Danette	
Cisneros	Victor	Victor Cisneros	Lomiguen	Eduardo	
Class	Angel		Marica	Hermogenes	
Diaz	Jeremy		Matos	Salvino	
Duran	Joel		McAllister	Richard	
Forgatch	Timothy		McHarris	Daniel	
Last	First	Signature	Last	First	Signature
			Louis	Pierre	

Safety Meeting SIGN-IN SHEETS
Effective Date: 5/16/2018













Rev. B

attended
attended

Safety Training: ISO 4001 Audit Related Topic
 Date: August 21, 2018
 Presented by: William Reilly

HAZARDOUS WASTE MANAGEMENT

TROY















Last	First	Signature	Last	First	Signature
Almonte	Carlos		Foster	Mitchell	
Aparicio	Carlos		Goitandia	John	
Avila	Nestor		Guerrero	Jean	
Baez	Roberto		Guevarra	Elmer	
Baquiran	Rogelio		Holden	Abdul	
Blanck	Patrick		Jeffers	Alan	
Boykins	Ben		Johnson	Kevin	
Burbano	Ivan		Johnson	Shakir	
Cadena	Arturo		Laing	Tason	
Caldwell	Micah		Leano	Danette	
Cisneros	Victor		Lomiguen	Eduardo	
Class	Angel		Marica	Hermogenes	
Diaz	Jeremy		Matos	Salvino	
Duran	Joel		McAllister	Richard	
Forgatch	Timothy		McHarris	Daniel	
Last	First	Signature	Last	First	Signature

Safety Training: ISO 4001 Audit Related Topic

Date: August 21, 2018

Presented by: William Reiley

HAZARDOUS WASTE MANAGEMENT

Morais	Manuel		Rodriguez	Angel	
Morales	Sam		Rogers	Jasmine	
Muhia	Patrick		Schumann	Demar	
Munoz	Howard		Scott	Derek	
Nath	Malcolm		Selim	Abdelnasser	
Nieto	Nestor		Smith	Johnnie	
Olmsted	David		Street	Andre	
Ortega	Luis		Taylor	Linden	
Palacios	Pablo		Teles	Joao	
Parker	Demond		Tiru	Joel	
Patel	Surrendra		Welch	Rawlston	
Patterson	Dion		Williams	Tennyson	
Peacock	James		Wright	Kyle	
Perez	Hector		Zedeck	Robert	attended
Rivera	Rafael		IZQUIERDO	Moises	Moises

(ADD)

Reiley Bill attended

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

Key # 17

FACILITY:

Troy Chemical - Newark

YEAR:

2018

WEEK	DATE & TIME	CONTAINERS					CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE	CORRECTIVE ACTION				
		CLOSED? (1)	CORRODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE DATE FOR 30, 90 or 180 days(1)	COM - PAT- IBLE (1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	aisle SPACE OK? (1)		LIQUID PRESENT? (1)	CONDITIO N OK? (1)(3)	DATE & TIME	ACTION TAKEN	SIGNATURE*
45	11/6/18	Y	N	N	Y	9/17/18	Y	16H	Y	Y	Y	RR	OK	BR		16 NH	
46	11/23/18	Y	N	N	Y	9/17/18	Y	16H	Y	Y	RR	OK	BR		10 NH		
47	11/30/18	Y	N	N	Y	9/17/18	Y	16H	Y	Y	RR	OK	BR		10 NH		
48	12/1/18	Y	N	N	Y	9/17/18	Y	16H	Y	Y	RR	OK	BR		10 NH		
49	12/1/18	X	N	N	Y	9/17/18	Y	18H	Y	Y	RR	OK	BR		10 NH		
50	12/20/18	Y	N	N	Y	9/17/18	Y	18H	Y	Y	RR	OK	BR		13 NH		
51	12/28/18	Y	N	N	Y	12/28/18	Y	6H	Y	Y	N	OK	BR		WASTE PICK-UP		
52	1/3/19	Y	N	N	Y	12/28/18	Y	6H	Y	Y	N	OK	BR		6 NH		
		Y	N	N	Y	12/28/18	Y	6H	Y	Y	N	OK	BR		6 NH + 3 PURGE WATER		

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A" - NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

* Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

Key #17

Tree City USA - Newark YEAR: 2018

✓

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
- (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A" -- NOT APPLICABLE
- (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

~~SECRET~~

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

Key #17

FACILITY:

Troy Chemical-Newark

YEAR:

2018

WEEK	DATE & TIME	CONTAINERS					INSPECTION			CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE*	CORRECTIVE ACTION	
		CLOSED? (1)	CORRODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COM -PAT-IBLE 2(1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	AISLE SPACE OK? (1)	LIQUID PRESENT? (1)	CONDITION OK? (1)(3)	DATE & TIME		ACTION TAKEN	SIGNATURE*
23	6/9	Y	N	N	Y	6/9/18	Y	1	Y	Y	Y	N	OK	72			
24	6/15	X	N	N	X	6/9/18	Y	1	Y	Y	N	OK	72				
25	6/20	Y	N	N	Y	6/9/18	Y	2	Y	Y	N	OK	72				
26	6/28	Y	N	N	Y	6/28/18	X	1	Y	Y	N	OK	72				
27	7/2/18	Y	N	N	Y	6/28/18	X	1	Y	Y	N	OK	72				
28	7/9/18	X	N	N	X	6/28/18	Y	1	Y	Y	N	OK	72				
29	7/16/18	Y	N	N	X	6/21/18	Y	8	Y	Y	N	OK	72				
30	7/23/18	X	N	N	X	6/21/18	Y	9	Y	Y	N	OK	72				
31	8/1/18	X	N	N	X	6/21/18	Y	9	Y	Y	N	OK	72				
32	8/19/18	Y	N	N	Y	6/21/18	Y	10	Y	Y	N	OK	72				
33	8/19/18	Y	N	N	X	6/21/18	Y	10	Y	Y	N	OK	72				

R-1-2 R-3-4
R-2-3 R-1-1
R-1-1 R-3-4
R-2-4 R-4-1

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES.
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY N/A -- NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

*Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

Key # 17

FACILITY:

Troy Chemical - Newark

YEAR: 2018

WEEK	DATE & TIME	CONTAINERS						CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE*	CORRECTIVE ACTION			
		CLOSED? (1)	COR-RODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COM-PART-IBLE (1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	aisle SPACE OK? (1)	LIQUID PRESENT? (1)		CONDITION OK? (1)(3)	DATE & TIME	ACTION TAKEN	SIGNATURE*
12	3/23/18	Y	N	N	Y	2/1	Y	6	Y	Y	Y	N	OK	Egn			
13	3/29/18	Y	N	N	Y			0	Y	Y	Y	N	OK	Egn			
14	4/6/18	Y	N	N	Y	4/5	Y	2	Y	Y	Y	N	OK	Egn			
15	4/13/18	Y	N	N	Y	4/5	Y	3	Y	Y	Y	N	OK	Egn			
16	4/20/18	Y	N	N	Y			0	Y	Y	Y	N	OK	Egn			
17	4/27/18	Y	N	N	Y	4/22	Y	1	Y	Y	Y	N	OK	Egn			
18	5/4	Y	N	N	Y	4/22	Y	1	Y	Y	Y	N	OK	Egn			
19	5/11	Y	N	N	Y	4/22	Y	1	Y	Y	Y	N	OK	Egn			
20	5/18	Y	N	N	Y	4/22	Y	3	Y	Y	Y	N	OK	Egn			
21	5/22	Y	N	N	Y	4/22	Y	3	Y	Y	Y	N	OK	Egn			
22	5/29	Y	N	N	Y	4/22	Y	5	Y	Y	Y	N	OK	Egn			

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A"; NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

*Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

Key 17

FACILITY: Tray Chemical - Newark YEAR: 2018

WEEK	DATE & TIME	CONTAINERS					CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE*	CORRECTIVE ACTION			
		CLOSED? (1)	COR-RODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COM-PAT-IBLE 2(1)	TOTAL NUMBER OF DUMPS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	ASLE SPACE OK? (1)		LIQUID PRESENT? (1)	CONDITIO N OK? (1)(3)	DATE & TIME	ACTION TAKEN
1	1/5/18	Y	2	2	Y	12/28/17	Y	2	Y	Y	N	OK				
2	1/10/18	Y	2	2	Y	12/28/17	Y	2	Y	Y	N	OK				
3	1/19/18	Y	2	2	Y	12/28/17	Y	2	Y	Y	N	OK				
4	1/26/18	Y	2	2	Y	12/28/17	Y	2	Y	Y	N	OK				
5	2/2/18	Y	2	2	Y	2/1/18	Y	1	Y	Y	N	OK				
6	2/9/18	Y	2	2	Y	2/1/18	Y	2	Y	Y	N	OK				
7	2/16/18	Y	2	2	Y	2/1/18	Y	3	Y	Y	N	OK				
8	2/23/18	Y	2	2	Y	2/1/18	Y	3	Y	Y	N	OK				
9	3/2/18	Y	2	2	Y	2/1/18	Y	3	Y	Y	N	OK				
10	3/9/18	Y	2	2	Y	2/1/18	Y	4	Y	Y	N	OK				
11	3/16/18	Y	2	2	Y	2/1/18	Y	5	Y	Y	N	OK				

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A" -- NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

*Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

FACILITY:

Troy Chemical - Newmarket2019

Ken #17

WEEK	DATE & TIME	CONTAINERS					CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE*	CORRECTIVE ACTION				
		CLOSED? (1)	COR-RODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COM -PAT-IBLE (1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	ASLE SPACE OK? (1)		LIQUID PRESENT? (1)	CONDITIO N OK? (1)(3)	DATE & TIME	ACTION TAKEN	SIGNATURE*
21	5/31	Y	N	N	Y	5/17	Y	2	Y	Y	Y	N	ok	BL	16-AS4002 PAUS		
22	6/7	Y	N	N	Y	5/17	Y	3	Y	Y	Y	N	ok	BL	1-PC9663		
23	6/14	Y	N	N	Y	5/17	Y	4	Y	Y	Y	N	ok	BL	3-PUAGUE WATER		
24	6/21	Y	N	N	Y	6/18	Y	2	Y	Y	Y	N	ok	BL	2-PC LABS AMPLIES		
25	6/28	Y	N	N	Y	6/18	Y	2	Y	Y	Y	N	ok	BL	2-PC LABS AMPLIES		
26	7/3	Y	N	N	Y	6/18	Y	3	Y	Y	Y	N	ok	BL	"		
27	7/12	Y	N	N	Y	7/10	Y	2	Y	Y	Y	N	ok	BL	"		
28	7/18	Y	N	N	Y	7/10	Y	3	Y	Y	Y	N	ok	BL	"		
29																	
30																	
31																	

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A" - NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

*Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

FACILITY:

Troy Chemical - Newbury

YEAR: 2019

Key #17

WEEK	DATE & TIME	CONTAINERS					INSPECTION			CONTAINER STORAGE AREA			SECONDARY CONTAINMENT		INSPECTOR SIGNATURE*	CORRECTIVE ACTION	
		CLOSED? (1)	CORRODED? (1)	LEAKS? (1)	CONTAINERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COMPTIBLE (1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	ASLE SPACE OK? (1)	LIQUID PRESENT? (1)	CONDITION OK? (1,3)	DATE & TIME		ACTION TAKEN	SIGNATURE*
12	3/26	Y	N	N	Y	12/28/18	Y	849 HAZ	Y	Y	Y	N	ok	BR	5 PURGE WATER		
13	4/5	Y	N	N	Y	4/5/18	Y	2 PAIRS	Y	Y	Y	N	ok	BR	2 PRODUCT / 1 TOTE / 1 WASTE / 1 PAIR		
14	4/12	Y	N	N	Y	4/5/18	Y	2 PAIRS	Y	Y	Y	N	ok	BR	1 PRODUCT on 4/4/19		
15	4/19	Y	N	N	Y	4/5/18	Y	2 PAIRS	Y	Y	Y	N	ok	BR	2 PAIRS		
16	4/26	Y	N	N	Y	4/5/18	Y	1-504 DRY	Y	Y	Y	N	ok	BR	3 PURGE WATER		
17	5/3	Y	N	N	Y	4/5/18	Y	2-94013	Y	Y	Y	N	ok	BR	10-354002 PAIRS		
18	5/10	Y	N	N	Y	4/5/18	Y	1-94013	Y	Y	Y	N	ok	BR	2-94013		
19	5/16	Y	N	N	Y	4/5/18	Y	2-94013	Y	Y	Y	N	ok	BR	1-94013		
20	5/24	Y	N	N	Y	5/17	Y	2-94013	Y	Y	Y	N	ok	BR	3-94013		

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES.
 (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY 'N/A' -- NOT APPLICABLE.
 (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.

IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE.

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IGNITABLE CORROSIVE UNCONTAINED PERSOLVENT
 R54002
 KEEP OUT

6/20
 2 BAGS
 94013

HAZARDOUS WASTE STORAGE AREA WEEKLY INSPECTION LOG

Key #17

FACILITY: Troy Chemical - Newark YEAR: 2019

INSPECTION																		
CONTAINERS		CONTAINER STORAGE AREA					SECONDARY CONTAINMENT			CORRECTIVE ACTION								
WEEK	DATE & TIME	CLOSED? (1)	COR-RODED? (1)	LEAKS? (1)	CONTAIN-ERS LABELED? (1)	START DATE for 30, 90 or 180 days(1)	COM-PAT- IBLE ?(1)	TOTAL NUMBER OF DRUMS	HAZ WASTE SIGN? (1)	NO SMOKING SIGN? (2)	ASLE SPACE OK? (1)	LIQUID PRESENT? (1)	CONDITIO N OK? (1)(3)	INSPECTOR SIGNATURE*	DATE & TIME	ACTION TAKEN	SIGNATURE*	
1	1/11/19	Y	N	N	Y	12/28/18	Y	6+9 HAZ	Y	Y	Y	N	OK	BR		6NH+7 BIT TOTES + 3 PURGE WATER		
2	1/18/19	Y	N	N	Y	12/28/18	Y	7+9 HAZ	Y	Y	Y	N	OK	BR		8NH+7 BIT TOTES + 3 PURGE WATER		
3	1/25/19	Y	N	N	Y	12/28	Y	7+9 HAZ	Y	Y	Y	N	OK	BR				
4	2/1	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
5	2/8	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
6	2/15	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
7	2/19	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
8	2/11	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
9	3/8	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
10	3/15	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				
11	3/22	Y	N	N	Y	12/28	Y	8+9 HAZ	Y	Y	Y	N	OK	BR				

NOTES:

- (1) SPECIFY YES OR NO AND IDENTIFY ALL PROBLEM CONTAINERS/ARTICLES/BOXES
 - (2) IF FACILITY DOES NOT STORE IGNITABLE OR REACTIVE WASTE, SPECIFY "N/A" - NOT APPLICABLE.
 - (3) SPECIFY IF SECONDARY CONTAINMENT AREA HAS LEAKS, CORROSION, EROSION, ETC.
- IF NECESSARY, PROVIDE ADDITIONAL INFORMATION (E.G., PROBLEMS FOUND AND CORRECTIVE ACTION TAKEN) BELOW OR ON A SEPARATE ATTACHED PAGE. REFERENCE INSPECTION DATE:

Problems 6-101 830100
New York 95 PRESENT 180683

*Instead of a hardcopy of the form with an actual signature, an electronic record is an acceptable substitute.

LAST WASTE PICK-UP: 12/28/18.

7 BIT TOTES FOR WASTE PICK-UP ON 2/18/19. COMPLETE.

EMERGENCY CONTINGENCY PLAN

TROY CHEMICAL CORPORATION

ONE AVENUE L

NEWARK, NEW JERSEY 07105

December, 2006
Revised: December, 2007
No changes
December, 2008
No changes
November, 2009
No changes
November 2010
No changes
October, 2011
Revised, pgs. 3, 4, 10, 11, 12, 13, 14
Revised, pg. 3
June, 2012
Reviewed
August, 2013
Reviewed and Revised September, 2014
Pg.10 and Bldg.50 map
Revised July,2015,Bldg.50 and Emergency Coordinator
Revised
November, 2016
Emergency Coordinator (Secondary). Changed MSDS to SDS.
October, 2018
Revised, pgs. 6, 10-16, 36-37, Appendix II

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

EMERGENCY PHONE NUMBERS

(Contacts to be made by the emergency coordinator as appropriate)

Newark Fire Department Dispatcher	911
Newark Police Emergency Response	911
N.J. Department of Environmental Protection	(877) WARNDP (24 Hours)
Clean Harbors	732-248-1997
Environmental Products	908-486-8600

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

GENERAL FACILITY DESCRIPTION

The Troy Chemical Corporation facility is a chemical manufacturing plant located on 1 Avenue L, Newark, New Jersey 07105. It has EPA I.D. # NJD002144517. The facility occupies approximately 6 acres in the City of Newark, Essex County, New Jersey. The telephone number is (973) 589-2500.

The processes conducted at the plant consist of a variety of chemical manufacturing operations, most of which are carried out on a batch basis.

PURPOSE

The contingency plan is designed to minimize hazards to human health or the environment from fires, explosions, or any unplanned sudden or non-sudden release of hazardous substances to air, soil, or surface water.

In the event it becomes necessary (due to regulatory revision, plan failure, facility changes, changes in the list of emergency coordinators, or changes in the list of emergency equipment), this plan will be amended.

A copy of this contingency plan and all amendments to the plan will be maintained in the files at the facility, and will be submitted to all local police departments, fire departments, hospitals, and State and local emergency response teams that may be called upon to provide emergency services.

IMPLEMENTATION

The provisions of the plan will be carried out immediately whenever there is a fire, explosion, or release of hazardous waste or hazardous substances which could threaten human health or the environment.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

EMERGENCY COORDINATOR

At all times, there will be at least one employee either on the facility premises or on call (available to respond to an emergency by reaching the facility within a short period of time) with the responsibility for coordinating all emergency response measures. This emergency coordinator will be thoroughly familiar with all aspects of the contingency plan, all operations and activities at the facility, the location and characteristics of hazardous materials handled, the location of all records within the facility, and the facility layout. In addition, this person will have the authority to commit the resources needed to carry out the contingency plan.

The primary emergency coordinator is

Robert Zedeck
3 Marberne Terrace, Livingston, NJ 07039
Office Phone # (973) 589-2500 x 3373
Home Phone # (973) 422-1997
Cell Phone # (973) 610-4821

The following personnel are designated as secondary coordinators listed in the order in which they will assume responsibility as alternates:

Bill Reilley
5 Alexander Avenue, Haskell, NJ 07420
Office Phone # (973) 589-2500 x 3254
Home Phone # (973) 255-6334
Cell Phone # (973) 508-4628

If an incident occurs at a time when the plant is not operating or at a time when none of the designated emergency coordinators are at the plant, the guard on duty at the time will be responsible for notifying the proper authorities, and then an emergency coordinator.

NOTE: Emergency Coordinator within the text of this plan may also include Production Supervisor(s) on 2nd and 3rd shifts, but contact with primary and secondary coordinator is necessary by the Production Supervisor(s).

ARRANGEMENTS WITH LOCAL AUTHORITIES

Arrangements will be made as follows:

- 1) To familiarize local police, fire departments, and emergency response teams (such as ambulance squads) with the layout of the facility, properties of hazardous materials handled at the facility and associated hazards, places where facility personnel would normally be working, entrances to roads inside the facility, and possible evacuation routes.
- 2) There is only one police and fire department in the City of Newark which will respond to an emergency.
- 3) With N. J. State emergency response teams, emergency response contractors and equipment suppliers in case their services might be required. (Arrangements have been made with Clean Harbors, Edison, N.J., 732-248-1997 and Environmental Products, 908-486-8600)
- 4) With a local hospital to familiarize it with the properties of hazardous substances handled at the facility, and the types of injuries or illnesses which could result from fires, explosions, or releases at the facility.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

EMERGENCY EQUIPMENT AVAILABLE AT FACILITY

A list of all the emergency equipment at the facility is attached (See Attachment #1). This table includes the location and physical description of each item on the list and a brief outline of its capabilities. Equipment on the list includes fire extinguishers and extinguishing systems, spill control equipment, communications and alarm systems, and decontamination equipment, among others. This table will be updated as necessary to reflect any changes in the quantities or types of equipment available for emergency use in the plant.

RESPONSE PERSONNEL IN THE PLANT

Fire or Explosion

An emergency paging system or evacuation horn will be used to warn facility personnel of a fire or explosion or major emergency which requires all facility personnel to be warned. All facility personnel will receive training in the proper use of hand held extinguishers to extinguish incipient fires and to assist them in escaping from a fire.

The Newark Fire Department has primary responsibility for extinguishing fires and Troy personnel will assist the Fire Department, when requested. An emergency siren has been installed to warn employees to evacuate the facilities when a major catastrophe occurs which could affect all Newark employees.

Procedures:

Employees who discover a fire or emergency are directed to immediately notify their supervisor, who will alert all personnel of the emergency by the emergency paging system or evacuation horn. All persons will leave the area and follow their supervisor to a safe site for further instructions. The emergency coordinator will direct all the activities necessary to mitigate the emergency and will make sure that the Newark Fire Department has been notified of the fire. Upon arrival of the Newark Fire Department, the emergency coordinator will work with the Fire Chief to direct all efforts to extinguish the fire. The emergency coordinator will implement the evacuation plan.

Release of Hazardous Substances to Air, Soil, or Surface Water:

Specific measures to be taken during air, water, soil releases is attached (See Attachment #3). Spill quantities on page 14.

EVACUATION PLAN

Evacuation Decision:

The emergency coordinator or one of his alternates will make the final decision to evacuate the facility.

Evacuation Signal(s):

Plant personnel will be notified of a decision to evacuate by the emergency page system or evacuation horn.

A windsock to determine proper direction for evacuation is present at Building 40, 99 and at the top of the fractionator.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

EVACUATION PLAN (cont.)

Evacuation Routes:

The main exit road from the facility provides one evacuation route; an alternate is the route through the grounds of Globe Metals, which is adjacent to Troy Chemical Corp.

The emergency coordinator will designate the evacuation route when he gives the evacuation signal. Personnel will follow their supervisors to the designated areas and await further instructions. All personnel are to be accounted for at the evacuation assembly area and first aid or other assistance will be provided. Emergency wardens have been designated to be responsible for evacuating specific areas of the plant (See Attachment #2). Evacuation routes are attached (See Attachment #4).

EMERGENCY PROCEDURES

- 1) Whenever there is an imminent or actual emergency condition, the emergency coordinator (or his designee) must immediately:
 - a) Activate internal facility alarms or communication systems, where applicable, to notify all facility personnel.
 - b) Notify appropriate State or local agencies with designated response roles if their help is needed. If the emergency is a fire, notify the Newark Fire Dept. at 973-733-7400 or 911.
- 2) Whenever there is a release of hazardous materials, the emergency coordinator must immediately identify the character, exact source, and amount of any released materials.
- 3) The emergency coordinator must also assess possible hazards to human health or the environment that may result from the release, fire or explosion (for example, the effects of any toxic, irritating, or asphyxiating gases that are generated, or the effects of any hazardous surface water run-offs resulting from the use of water or chemical agents to control fire and heat-induced explosions.)
- 4) If the emergency coordinator determines that the facility has had a release, fire, or explosion which could endanger human health or the environment, he must report within 15 minutes his findings as follows:
 - a) If it appears that evacuation of local areas will be necessary, he must immediately notify appropriate local authorities, and will be available to help the appropriate officials decide whether local areas should be evacuated.
 - b) He must immediately notify the New Jersey Department of Environmental Protection at 1-877-WARNDEP. If this number is inoperable, then contact State Police at (609) 882-2000. The verbal report must include:
 - i) Name, title, and telephone number of reporter
 - ii) Name and address including county of facility
 - iii) Time and type of incident (e.g. release, fire) whether to land or water
 - iv) Common name and quantity of material(s) involved, to the extent known
 - v) Date and time discharge began, date and time when discovered, date and time when discharge ended
 - vi) The possible hazards to human health or the environment outside the facility
 - vii) Containment and clean up action taken
 - viii) Name and address of person responsible for the discharge

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

EMERGENCY PROCEDURES (cont.)

- 5) During an emergency, the emergency coordinator must take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous substances at the facility. These measures must include, where applicable, stopping processes and operations, collecting and containing released waste, and removing or isolating containers.
- 6) If the facility stops operations in response to a fire, explosion, or release, the emergency coordinator must monitor for leaks, pressure buildup, gas generation, or ruptures in valves, pipes, or other equipment, whenever this is appropriate.
- 7) Immediately after an emergency, the emergency coordinator must provide for treating, storing, or disposing of recovered waste, contaminated soil, or surface water, or any other material that results from a release, fire, or explosion at the facility.
- 8) The emergency coordinator must ensure that, in the affected area(s) of the facility:
 - a) No waste that may be incompatible with the released material is treated, stored, or disposed of until cleanup procedures are completed.
 - b) All emergency equipment listed in the contingency plan is cleaned and fit for its intended use before operations are resumed.
- 9) The owner or operator must notify the New Jersey Department of Environmental Protection and appropriate local authorities that the facility is in compliance with paragraph (8) before operations are resumed in the affected area(s) of the facility.
- 10) The owner or operator must note in the operating record the time, date, and details of any incident that requires implementing the contingency plan. Within 30 days after the incident, he must submit a written report on the incident to the New Jersey Department of Environmental Protection. The report must include as a minimum the following including page 6(a) and 6(b).
 - a) Name, address, and telephone number of the owner or operator
 - b) Name, address, and telephone number of the facility.
 - c) Date, time, and type of incident (e.g., fire, explosion)
 - d) Name and quantity of material(s) involved.
 - e) The extent of injuries, if any.
 - f) An assessment of actual or potential hazards to human health or the environment, where this is applicable.
 - g) Estimate quantity and disposition of recovered material that resulted from the incident.
 - h) Description of immediate actions that were taken.
 - i) Provide an implementation schedule to undertake suggested measures to eliminate the problem.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #1

EMERGENCY EQUIPMENT AND LOCATIONS (See Attachment #4 for specific locations in each building)

A. Building 1 - Main Office & Laboratory

- 1) 1 - ABC Fire Extinguishers (Main Office)
- 2) 1 - Halon Fire Extinguishers (QC Lab)
- 3) 6 - CO₂ Fire Extinguishers (QC Lab, Main Office)
- 4) 1 - Safety Shower (QC Lab)
- 5) 2 - CO₂ Fire Extinguisher (Micro Lab)
- 6) 2 - Eyewashes (Microlab, QC Lab)

B. Building 20 - Main Warehouse

- 1) 8 - ABC Fire Extinguishers
- 2) 2 - Safety Showers
- 3) 2 - Eyewashes
- 4) 1 - Air Pack
- 5) Speedy-dri (Outside Warehouse Building) – (20, 50-lb bags)

D. Lunchroom

- 1) 1 - ABC Fire Extinguisher

E. Building 30 - Maintenance/Boiler Shop

- 1) 5 - ABC Fire Extinguishers (2 - Electrical Shop, 2 - Boiler Room, 1 - Maint Shop 2nd flr)
- 2) 1 - CO₂ Fire Extinguisher (Welding Shop)
- 3) 1 - Safety Shower (Boiler Room)
- 4) 1 - Eyewash (Boiler Room)
- 5) Speedy-Dri (Outside Maintenance Shop) (20, 50-lb bags)
- 6) 2 - Portable Pumps

G. Electrical Panel Room

- 1) 1 - CO₂ Fire Extinguisher
- 2) 2 - Halon Fire Extinguishers

H. Building 40/41

- 1) 6 - ABC Fire Extinguishers (1st floor, 3rd floor-Bldg. 40, 1st floor, 3rd floor-Bldg. 41)
- 2) 1 - CO₂ Fire Extinguisher (1st floor)
- 3) 1 - CO₂ Fire Extinguisher (2nd floor)
- 4) 4 - Safety Showers (1st Fl, 2nd Fl & 3rd Fl)
- 5) 6 - Eyewashes (1st floor, 2nd floor, 3rd floor)

I. Building 56 - Powder Blending Room

- 1) 3 - ABC Fire Extinguishers (Powder Room)
- 2) 1 - Eye Wash, 1 - Safety Shower

Communications System

- 1) Paging system exists throughout the entire facility.
- 2) Evacuation Horn

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #1 (cont.)

K. Building 61

- 1) 6 - ABC Fire Extinguishers (1 – Entrance; 2- 1st floor; 3- 3rd floor)
- 2) 1 - CO₂ Fire Extinguisher (Electrical Panel)
- 3) 2 - Air Packs
- 4) 1 - Safety Shower
- 5) 1 - Eyewash

L. Building 71 - Polyphase

- 1) 12 - ABC Fire Extinguishers (Outside Building, 1st floor, 2nd floor, 3rd floor)
- 2) 3 - CO₂ Fire Extinguishers (1 - Control Room, 1 - Chiller Room, 1 - 1st floor)
- 3) 3 - Air Packs (2 - Outside Control Room; 1 - Baghouse Collector;)
- 4) 4 - Safety Showers (1- 1st floor, 2- 2nd floor, 1- 3rd floor)
- 5) 4 - Eyewashes (1- 1st floor, 2- 2nd floor, 1- 3rd floor)
- 6) 1 - CO₂ (Chiller Room)
- 7) 2 – Emergency air packs (3rd floor)

M. Guard House

- 1) 1 - ABC Fire Extinguisher

N. Building 81

- 1) 10 - ABC Fire Extinguishers
- 2) 1 - CO₂ Fire Extinguisher (Receiving Office)
- 3) 1 – Eyewash & Shower
- 4) Chemical & oil absorbent pads (2nd level) (200 pads), (100-ft. of containment booms)

O. Scale Hut

- 1) 1 - CO₂ Fire Extinguisher
- 2) 1 – Eyewash & shower

P. Building 91

- 1) 5 - ABC Fire Extinguishers (1st floor)
- 2) 2 - CO₂ Fire Extinguishers (2nd floor)
- 3) 2 - Safety Showers, 2 - Eye Washes

Q. Building 99 (Offices, Library and Labs)

- 1) 6 - ABC Fire Extinguishers (R&D Lab; Office; Outside Powder Lab)
- 2) 5 - CO₂ Fire Extinguishers(R&D, Office, Powder Lab)
- 3) 1 - Safety Shower (R&D Lab)
- 4) 2 - Eyewash (R&D Lab, Powder Lab)
- 5) 1 - Fire Blanket (R&D Lab)

R. Hazardous Waste Area

- 1) 1 - CO₂ Fire Extinguisher
- 2) 1 - ABC Wheeled Fire Extinguisher

S. Boiler Room - Bldg. 36

- 1) 5- CO₂ Fire Extinguishers (3- Boiler Room, 2- Cooling Tower)
- 2) 1 – Eyewash & Shower

T. Spill Supply Cabinets (contains 50 containment pads, shovel per cabinet)

- 1) Across from building 71, Control Room
- 2) Next to East wall of building 56

U. Transfer Hut

- 1) 1- ABC Fire Extinguisher

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #1 (cont.)

CAPABILITIES OF EQUIPMENT

- 1) ABC Fire Extinguisher - use on combustible materials, such as wood, paper, cloth and rubber plus flammable liquids, gases, grease, and electrical equipment.
- 2) BC Fire Extinguisher - use on electrical equipment and on flammable liquids, gases, and greases.
- 3) ABC Wheeled Fire Extinguisher - same as item 1 but has capabilities to handle larger fire than 20# unit.
- 4) CO₂ Fire Extinguisher - has same capabilities as BC fire extinguisher.
- 5) Halon Fire Extinguisher - use on electrical equipment and on flammable liquids, gases, and greases.
- 6) Air Packs - use in oxygen deficient atmosphere where chemical fumes and gases are present.
- 7) Safety Shower - use on victim that has been splashed with chemicals, acids, or caustics.
- 8) Eyewash - use on victim that has been splashed with chemicals, acids, or caustics.
- 9) Speedy-dri - use on oil and chemical spills to absorb the spilled materials.
- 10) Oil and chemical absorbent pads - use on oil and chemical spills to absorb the spilled materials.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #2

EMERGENCY EVACUATION WARDENS

QC Manager	Quality Control Lab
Belal Rahim	Warehouse, Bldg. 20
Rotating Supervisor	Bldgs 40/41, 56, 61, 91, Effluent Area, Plant Yard, Polyphase
Clyde Dumont	Receiving, Bldg. 81
Nick Genoese	Maint. Shop
Comptroller	Main Office

On the 4:00 p.m. - 12:00 a.m. shift, the emergency wardens are as follows:

Supervisor	Bldg. 61, 56, 81 & surrounding area
	Polyphase Bldg., Locker Room, Maint. Shop, Bldg. 40/41 & surrounding area

On the 12:00 a.m. - 8:00 a.m. shift, the emergency wardens are as follows:

Supervisor	Bldg. 61, 56, 81 & surrounding area
	Polyphase Bldg., Locker Room, Maint. Shop, Bldg. 40/41 & surrounding area

The emergency wardens for each area and building will make sure that all personnel have evacuated the areas and buildings and have moved to a safe location.

PLANT MONITORING PROCEDURES

The entire plant facility, including storage tanks, drum storage areas, and process reactors and equipment are visually inspected on a daily basis by plant supervisory and operations personnel. Remedial action is immediately taken if leaking equipment or spills are discovered.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #3

HAZARDOUS ATMOSPHERIC RELEASES RESPONSE

If a release to atmosphere of a hazardous substance should occur, the following specific actions will take place:

- 1) The area supervisor will immediately evacuate employees from the area of the release and begin shutdown of operations.
- 2) The emergency coordinator or his alternate (listed on page 2 of the Contingency Plan) will also be notified of the release.
- 3) The emergency coordinator will determine, with the area supervisor, the nature and the quantities of the release. Raw material and finished product material safety data sheets (SDS) are available for the emergency coordinators. As soon as the released material has been identified, reference will be made to the SDS which lists the procedure to handle the release as well as personnel safety information. Incidental releases, where the substance can be absorbed, neutralized or otherwise controlled at the time of release by employees in the immediate release area, will be handled in-house provided that employees have been provided with, trained, and regularly wear the appropriate PPE.
- 4) The emergency coordinator(s) will make the decision to implement the site-wide facility evacuation procedures depending upon the quantity and nature of the material in conjunction with information obtained from the SDS and the Occupational Health Guidelines for Chemical Hazards.
- 5) The emergency coordinator will delegate to a subordinate the responsibility of contacting facility response personnel as well as appropriate outside emergency agencies if it is determined that the release cannot be contained by plant personnel. The outside agencies will receive pertinent information regarding the release to render a decision to evacuate the surrounding industrial area. The State D.E.P. will also be notified of the release.
- 6) A clean up team will receive instructions from the emergency coordinator(s) as to containment of the release. This response team will enter the area with appropriate safety equipment and insure that operations have ceased, there is no further atmospheric release, and that all valves, pipes, or other equipment is secure against further releases. The emergency coordinator will assist the local and state authorities upon their arrival.
- 7) When the area is secure, cleanup will commence and disposal of contaminated material will be according to best engineering practices and/or regulatory requirements.
- 8) The emergency coordinator in conjunction with local regulatory authorities will determine when employees can re-enter the area.
- 9) The ERA Department will make the final decision regarding spill control, containment, and disposal.

NOTE: Emergency Coordinator may also be Production Supervisor(s) on second or third shifts who will also contact the primary and/or secondary coordinators.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #3 (cont.)

HAZARDOUS SUBSTANCE RELEASE TO SURFACE WATER

In the event of a hazardous substance release to surface water, the following specific actions will be implemented:

(Note: The possibility of a hazardous substance spill to surface water is remote. The facility's storm drain system and in-plant process effluent system are drained to our wastewater-stormwater treatment facility. A hazardous spill would enter this system and be properly treated without any surface water contact. However, should a spill penetrate our defensive wastewater treatment facility, the following actions would be implemented.)

- 1) Any employee who observes a hazardous substance spill which could possibly enter the surface water must immediately notify the emergency coordinator or supervisor. The employee or area supervisor will begin shutdown of operations which created the spill.
- 2) The emergency coordinator will assess the situation and determine the nature and quantity of the spill. He will reference the SDS or other reference material to determine the appropriate safety and containment procedure. He will institute the evacuation plan, if required, and contact local agencies for evacuation, if needed. Incidental releases, where the substance can be absorbed, neutralized or otherwise controlled at the time of release by employees in the immediate release area, will be handled inhouse provided that employees have been provided with, trained, and regularly wear the appropriate PPE.
- 3) The coordinator or his subordinate will contact the ERA Department who will give the appropriate instructions for containment. The proper regulatory authorities will be contacted for assistance.
- 4) Plant personnel will collect the appropriate safety and spill containment equipment and proceed to the spill area.
- 5) The Coordinator or subordinate will utilize spill absorbents or spill booms to contain the spill. Every effort will be made to prevent further spread of the spilled material. Outside spill response teams will be contacted by the coordinator in order to lend assistance and specialized cleanup expertise.
- 6) Once the spill has been cleaned up, the contaminated absorbents will be disposed of as hazardous waste. Equipment used and supplies will be returned to their proper location at the facility.
- 7) The emergency coordinator will then decide to allow employees to return to their proper work location if local and state authorities concur.
- 8) The ERA Department will make the final decision regarding spill control, containment, and disposal.

NOTE: Emergency Coordinator may also be Production Supervisor(s) on second or third shifts who will also contact the primary and/or secondary coordinators.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

ATTACHMENT #3 (cont.)

HAZARDOUS SUBSTANCE RELEASE TO SOIL

Should a hazardous substance release to soil occur, the following actions will be implemented.

(Note: Plant operations occur on asphaltic or concrete surfaces. Any spills on these surfaces would not be able to penetrate into the soil. Should a spill occur, however, the following would be implemented.)

- 1) The employee and/or area supervisor will curtail operations which created the spill. Depending upon the nature and quantity of the spilled materials, employees within the immediate area may be evacuated by the supervisor or the emergency coordinator.
- 2) The emergency coordinator will be notified of the spill and will determine from the SDS or other reference materials the best safety and containment procedures. He will also determine the need to contact outside agencies for evacuation and assistance. He will implement Troy's evacuation plan, if warranted. He will notify the State D.E.P. and the ERA Department. Incidental releases, where the substance can be absorbed, neutralized or otherwise controlled at the time of release by employees in the immediate release area, will be handled inhouse provided that employees have been provided with, trained, and regularly wear the appropriate PPE.
- 3) A cleanup team will receive instructions from the emergency coordinator regarding safety precautions and containment procedures for the spill. The team will obtain the required safety and containment equipment and proceed to the spill.
- 4) The ERA Department will contain the spill utilizing the appropriate containment equipment for the particular spill being controlled. Outside spill team contractors may be contacted if the spill warrants it.
- 5) Once the spill is contained, proper action will be taken to neutralize the material spilled and cleanup will commence. All contaminated cleanup and containment materials will be properly disposed.
- 6) When the emergency coordinator declares the area safe and regulatory authorities agree, employees may re-enter the area.
- 7) The ERA Department will make the final decision regarding spill control, containment, and disposal.

NOTE: Emergency Coordinator may also be Production Supervisor(s) on second or third shifts who will also contact the primary and/or secondary coordinators.

EMERGENCY CONTINGENCY PLAN FOR TROY CHEMICAL CORP., NEWARK, N.J.

CLEAN-UP PROCEDURE

Incidental spills can be handled by in-house employees as follows:

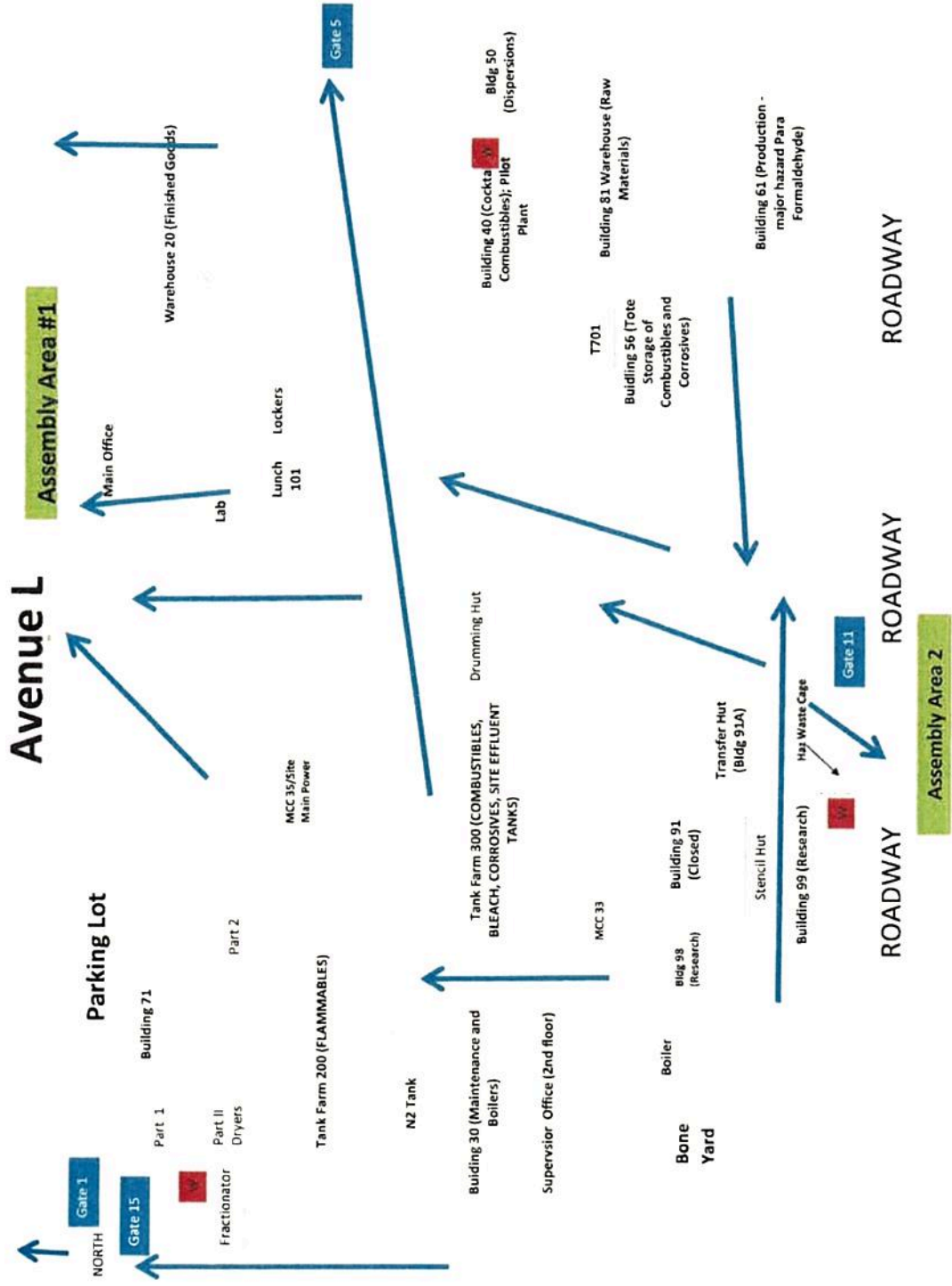
- 1) Spills of 20 gallons or less
- 2) Spills of solids of 50 pounds or less

The above spills will be handled based upon the hazard of the chemical spill via the information supplied by the SDS and the personal protective equipment needed. The emergency coordinator will make the final decision on clean-up.

Spills greater than (1) or (2) will be mitigated per emergency coordinator's decision.

Exceptions

Spills of highly hazardous chemicals of any quantity must be reported to the supervisors and emergency coordinators. Highly hazardous chemicals are propargyl alcohol, methanol, ammonia, butyl isocyanate, sodium hydroxide, paraformaldehyde, 174, 186 and 192.



Notes:

- 1 Not to scale
- 2 Assembly Area
- 3 Evacuation Route
- 4 Wind Sock

Evacuation Map
by ADS
August 2019 cl



TROY CHEMICAL CORPORATION, INC.

Dr. Robert Anthony Mustillo
Medical Director
Ironbound Medical Services, LLC
221 Chestnut Street
Newark, NJ 07105-1558

August 12, 2019

Dear Dr. Mustillo,

Troy Chemical Corporation is pleased to have Ironbound Medical Services, LLC (IMS) as a partner in providing urgent care for illnesses and injuries for our employees. IMS has also provided screening services for related medical evaluations such as Respirator Fit Testing.

In the event that any additional information is needed regarding materials that our employees work with, please contact our Safety Manager – Jim Manzella – by email or directly by phone. His email address is: manzellaj@troycorp.com and the phone contact information is: 973-589-2500 ext. 3342.

We appreciate your continued support and interest in the well-being of our employees.

Sincerely,

William Reilley
Environmental Manager
Troy Chemical Corporation
reilleyw@troycorp.com
973-589-2500 ext. 3254


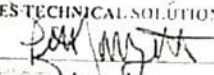
Veolia ES Technical Solutions, L.L.C. (VES)

ENVIRONMENTAL SERVICES AGREEMENT (*modified)

NAME OF CUSTOMER AND CUSTOMER BILLING ADDRESS Troy Corporation 8 Vreeland Rd. Florham Park, NJ 07932 Contact Phone:	CUSTOMER CONTRACTING ADDRESS <i>(if different from Billing Address)</i> One Avenue L Newark, NJ 07105 Contact Phone:	CUSTOMER SERVICE LOCATION <i>(if different from Billing Address)</i> Contact Phone:
Contractor Customer Service:		Contractor Contact:

NOTICE: I HAVE READ THE ENTIRE AGREEMENT AND ACCEPT THE AGREEMENT IN ITS ENTIRETY, INCLUDING TERMS AND CONDITIONS PRINTED HEREUNDER, AND I HAVE RECEIVED A TRUE COPY THEREOF.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement by their duly authorized representatives.

Customer By:  Name: Jose Lima Title: VP Supply Chain / Procurement Date: 7/3/2019	VEOLIA ES TECHNICAL SOLUTIONS, L.L.C. By:  Name: Peter Marguth Title: Sales Manager Date: 7/8/19 Address: 1 Eden Lane Ponds, NJ 07836
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This Environmental Services Agreement, consisting of the terms and conditions set forth below, the Profile Sheet and such supplemental contract documents as are described herein (all of the foregoing being collectively referred to as the "Agreement"), is made as of the date shown above by and between the customer named above ("Customer") and Veolia ES Technical Solutions, L.L.C. ("Contractor").

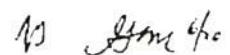
1. **DEFINITIONS** The following terms used in this Agreement shall have the meanings set forth below:

- a. "Facility" means a storage, treatment and/or disposal facility approved by Contractor, and which is permitted to accept waste materials under applicable laws and regulations.
- b. "Profile Sheet" means a standard Contractor Generator's Waste Profile Sheet executed by Customer or Generator.
- c. "Services" means analytical, collection, management, treatment, remediation, transportation, emergency response, disposal and recycling services and such other services which Contractor may perform from time to time with respect to Customer's waste materials.
- d. "Confirmation Document" means the document either signed by or otherwise consented to by Contractor and Customer which sets out the scope of Services to be performed and all other terms and conditions (including pricing) for the Services. The Confirmation Document may be amended by mutual written agreement of the parties.
- e. "Universal Wastes" means those wastes defined in 40 CFR §273.9.
- f. "Household Hazardous Wastes" means those wastes excluded from regulation as Hazardous Wastes pursuant to 40 CFR 261.4 (b) (1).

2. **ORDERING SERVICES**

- a. Customer may provide Contractor with a proposal solicitation, purchase order or other equivalent document requesting particular Services which Customer wishes Contractor to perform. Unless the method of treatment or disposal for Customer's wastes is specifically identified in Customer's solicitation, purchase order or equivalent document, Contractor is responsible for selecting which lawful means of treatment or disposal of Customer's wastes will be employed. Customer shall in any event

Rev. 090517



*EXHIBIT B

**EMERGENCY RESPONSE SERVICES RIDER
TO
ENVIRONMENTAL SERVICES AGREEMENT (ESA)**

EMERGENCY RESPONSE. In addition to the terms and conditions contained in the ESA between Troy Chemical Corporation and Contractor, if the Work or Services involve emergency response in addition to the transportation and disposal of hazardous waste, the following environmental provisions shall also apply:

1. SCOPE OF WORK

Contractor agrees to provide emergency response services (WORK) required for the mitigation of adverse environmental conditions arising from or by the release, spill, escape of oil, hazardous substances, pollutants or contaminants into the environment, at a location specified by Troy Chemical Corporation (Project Site or Site), and further identified on an Emergency Work Order (EWO) Attachment B-1. Contractor and Troy Chemical Corporation understand that the complete and exact WORK required may not be known at the time of Troy Chemical Corporation's request. The complete and exact WORK to be performed by Contractor shall be determined by Contractor in Contractor's professional discretion and in coordination with Troy Chemical Corporation's representative, whether or not Troy Chemical Corporation's representative is present at the Project Site.

Contractor, either directly or through Contractor's affiliated companies, or other Contractor-approved subcontractors, shall furnish all labor, materials, tools, equipment, unloading, hauling, taxes, insurance, and other items necessary, to perform the WORK in conformance with this Agreement. Contractor's affiliated companies shall include, but are not limited to, Veolia Water, Veolia ES Enterprise Solutions, and their respective operating subsidiaries.

2. ADMINISTRATION

Troy Chemical Corporation may request WORK by contacting Contractor's Emergency Response Dispatch Center at any time by calling 1-800-688-4005. An EWO will be prepared by Contractor's branch response manager and emailed to Donn Hirschmann (hirschmann@troycorp.com celi 973-307-6977) for signature and approval, then return emailed to the response manager generating the EWO to confirm WORK contracted for hereunder by Troy Chemical Corporation.

3. PRICING

The pricing associated with any emergency response services can be found on Attachment B-2.

February 22, 2019

Essex County Dept. of Health and Rehabilitation
Health Officer
Environmental Health Office
115 Clifton Avenue, 3rd Floor
Newark, NJ 07104

To Whom It May Concern:

Enclosed please find the 2018 Community Right-To-Know Survey for Troy Chemical Corporation, Newark Facility.

If you need to contact me, my number is (973) 443-4200 ext. 2226.

Very Truly Yours,

Sid Alla
Manager, Product Safety

Donn, Hirschmann
Director, Safety, Health & Environmental

Enclosures

February 22, 2019

Newark Fire Department
1010 18th Avenue
Newark, NJ 07106

To Whom It May Concern:

Enclosed please find the 2018 Community Right-To-Know Survey for Troy Chemical Corporation, Newark Facility.

If you need to contact me, my number is (973) 443-4200 ext. 2226.

Very Truly Yours,

Sid Alla
Manager, Product Safety

Donn, Hirschmann
Director, Safety, Health & Environmental

Enclosures

February 22, 2019

Newark Police Department
649 Market Street
Newark, NJ 07105

To Whom It May Concern:

Enclosed please find the 2018 Community Right-To-Know Survey for Troy Chemical Corporation, Newark Facility.

If you need to contact me, my number is (973) 443-4200 ext. 2226.

Very Truly Yours,

Sid Alla
Manager, Product Safety

Donn, Hirschmann
Director, Safety, Health & Environmental

Enclosures

February 22, 2019

Newark City
Director Keith Isaac
480 Clinton Avenue, 3rd Floor
Newark, NJ 07102

To Whom It May Concern:

Enclosed please find the 2018 Community Right-To-Know Survey for Troy Chemical Corporation, Newark Facility.

If you need to contact me, my number is (973) 443-4200 ext. 2226.

Very Truly Yours,

Sid Alla
Manager, Product Safety

Donn, Hirschmann
Director, Safety, Health & Environmental

Enclosures



Clean Harbors
42 Longwater Drive
P.O. Box 9149
Norwell, MA 02061-9149
781.792.5000
800.282.0058
www.cleanharbors.com

February 22, 2017

Mr. Dennis Huacon
Troy Chemical Corporation
One Avenue L
Newark, NJ 07105

Dear Mr. Huacon:

Please let this letter serve as evidence that the STANDBY EMERGENCY RESPONSE AGREEMENT (SERA), executed on September 29, 2000 by Clean Harbors Environmental Services (CHES), with corporate offices in Norwell, Massachusetts and Troy Chemical Corporation is an "evergreen" agreement and, as such, remains in force on this date.

The purpose and intent of the SERA was, and continues to be, to provide the Troy Chemical Corporation with emergency oil spill response resources and response capabilities, as required under the Oil Pollution Act of 1990, according to the terms and conditions of the September 29, 2000 agreement and in accordance with the USCG OSRO Ratings on file with the USCG for Clean Harbors.

In the event that an Emergency Response is identified, contact 1-800-645-8265 (1-800-OIL-TANK) immediately to reach the Clean Harbors Emergency Operations Center. A Clean Harbors EOC Duty Operator will then be able to provide sound management throughout the course of the event and rapid response time of response equipment and personnel.

Clean Harbors holds all necessary permits to perform this type of emergency response, and has regular training programs in place for all of its responders, including, but not limited to, 40 hour OSHA "Hazwoper" training and annual 8 hour refresher.

Any questions on this matter should be directed to this writer at (781) 792-5000.

Sincerely,
John Rodier

United States Environmental Protection Agency
RCRA SUBTITLE C SITE IDENTIFICATION FORM



1. Reason for Submittal (Select only one)

<input type="checkbox"/>	Obtaining or updating an EPA ID number for an on-going regulated activity that will continue for a period of time (includes HSM activity)
<input checked="" type="checkbox"/>	Submitting as a component of the Hazardous Waste Report for Reporting Year <u>2017</u>
<input checked="" type="checkbox"/>	Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)
<input type="checkbox"/>	Notifying that regulated Activity is not longer occurring as this site.
<input type="checkbox"/>	Obtaining or updating an EPA ID number for conducting Electronic Manifest Broker activities
<input type="checkbox"/>	Submitting a new or revised Part A Form

2. Site EPA ID Number

NJD002144517

3. Site Name

TROY CHEMICAL CORPORATION, INC.

4. Site Location Address

Street Address	1 AVENUE L		
City, Town, or Village:	NEWARK	County:	NJ013
State:	NJ	Country	US
		Zip Code:	07105

5. Site Mailing Address

Street Address	1 AVENUE L		
City, Town, or Village:	NEWARK		
State:	NJ	Country:	US
		Zip Code:	07105

6. Site Land Type

<input checked="" type="checkbox"/> Private	<input type="checkbox"/> County	<input type="checkbox"/> District	<input type="checkbox"/> Federal	<input type="checkbox"/> Indian	<input type="checkbox"/> Municipal	<input type="checkbox"/> State	<input type="checkbox"/> Other
---	---------------------------------	-----------------------------------	----------------------------------	---------------------------------	------------------------------------	--------------------------------	--------------------------------

7. NAICS Code(s) for the Site

A. 325510	B.	C.	D.
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EPA ID Number NJD002144517

Date Received

8. Site Contact Information

First Name	MARCUS	MI	Last Name	LEWIS
Title	DIRECTOR, SAFETY, HEALTH & ENVIRONMENTAL			
Street Address	1 AVENUE L			
City, Town, or Village	NEWARK			
State	NJ	Country	US	Zip Code 07105
Email :	LEWISM@TROYCORP.COM			
Phone	9734434200	Ext	3388	Fax

9. Legal Owner and Operator of the Site

A. Name of Site's Owner:

Full Name	TROY CORPORATION	Date Became Owner	08/04/1979
Owner Type	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address	8 VREELAND ROAD		
City, Town, or Village	FLORHAM PARK		
State:	NJ	Country	US
		Zip Code	07932
Email			
Phone	9734434200	Ext	
		Fax	
Comments			

B. Name of Site's Operator:

Full Name	TROY CORPORATION	Date Became Operator	09/01/1966
Operator Type	<input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Tribal <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
Street Address	1 AVENUE L		
City, Town, or Village	NEWARK		
State:	NJ	Country	US
		Zip Code	07105
Email			
Phone	9734434200	Ext	
		Fax	
Comments			

10. Type of Regulated Waste Activity (at your site)

Mark "Yes" or "No" for all current activities (as of the date submitting the form); complete any additional boxes as instructed

A. Hazardous Waste Activities

<input checked="" type="radio"/> N	1. Generator of Hazardous Waste – If Yes, mark only one of the following - a, b, or c.	
<input checked="" type="checkbox"/>	a. LQG	- Generates, in any calendar month (including quantities imported by importer site) 1,000 kg/mo (2,200 lbs./mo.) or more of hazardous waste; or - Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs./mo) of acute hazardous waste; or - Generates, in any calendar month, or accumulates at any time, more than 100 kg/mo (220 lbs./mo) of
<input type="checkbox"/>	b. SQG	100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste and no more than 1 kg (2.2 lb) of acute hazardous waste and no more than 100 kg (220 lb) of any acute hazardous spill cleanup material
<input type="checkbox"/>	c. VSQG	Less than or equal to 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste.
If "Yes" above, indicate other generator activities in 2 and 3, as applicable.		
<input checked="" type="radio"/> Y	2. Short-Term Generator (generate from a short-term or onetime event and not from on-going processes). If "Yes", provide an explanation in the Comments section.	
<input checked="" type="radio"/> Y	3. Mixed Waste (hazardous and radioactive) Generator	
<input checked="" type="radio"/> Y	4. Treater, Storer, or Disposer of Hazardous Waste – Note: A hazardous waste Part B permit is required for these activities.	
<input checked="" type="radio"/> Y	5. Receives Hazardous Waste from Off-site	
<input checked="" type="radio"/> Y	6. Recycler of Hazardous Waste	
<input type="checkbox"/>	a. Recycler who stores prior to recycling	
<input type="checkbox"/>	b. Recycler who does not store prior to recycling	
<input checked="" type="radio"/> Y	7. Exempt Boiler and/or Industrial Furnace – If Yes, mark all that apply.	
<input type="checkbox"/>	a. Small Quantity On-site Burner Exemption	
<input type="checkbox"/>	b. Smelting, Melting, and Refining Furnace Exemption	

B. Waste Codes for Federally Regulated Hazardous Wastes.

Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

D001, D002, D003, D004, D005, D006, D007, D008, D009, D010, D011, D018, D019, D022, F002, F003, F005, P005, P028, P029, P088, P102, P205, U007, U008, U044, U113, U211, U226, U228, U372 bk
--

C. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes.

Please list the waste codes of the State hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.

--

11. Additional Regulated Waste Activity

A. Other Waste Activities

Y <input checked="" type="radio"/>	1. Transporter of Hazardous Waste -- If Yes, mark all that apply.
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
Y <input checked="" type="radio"/>	2. Underground Injection Control
Y <input checked="" type="radio"/>	3. United States Importer of Hazardous Waste
Y <input checked="" type="radio"/>	4. Recognized Trader -- If "Yes", mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter
Y <input checked="" type="radio"/>	5. Importer/Exporter of Spent Lead-Acid Batteries (SLAs) under 40 CFR 266 Subpart G -- If "Yes", mark all that apply.
<input type="checkbox"/>	a. Importer
<input type="checkbox"/>	b. Exporter

B. Universal Waste Activities

Y <input checked="" type="radio"/>	1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) - If "Yes" mark all that apply. Note: refer to your State regulations to determine what is regulated.
<input type="checkbox"/>	a. Batteries
<input type="checkbox"/>	b. Pesticides
<input type="checkbox"/>	c. Mercury containing equipment
<input type="checkbox"/>	d. Lamps
<input type="checkbox"/>	e. Other (specify)
<input type="checkbox"/>	e. Other (specify)
<input type="checkbox"/>	e. Other (specify)
Y <input checked="" type="radio"/>	2. Destination Facility for Universal Waste. Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Y <input checked="" type="radio"/>	1. Used Oil Transporter -- If "Yes", mark all that apply
<input type="checkbox"/>	a. Transporter
<input type="checkbox"/>	b. Transfer Facility (at your site)
Y <input checked="" type="radio"/>	2. Used Oil Processor and/or Re-refiner -- If "Yes", mark all that apply
<input type="checkbox"/>	a. Processor
<input type="checkbox"/>	b. Re-refiner
Y <input checked="" type="radio"/>	3. Off-Specification Used Oil Burner
Y <input checked="" type="radio"/>	4. Used Oil Fuel Marketer -- If "Yes", mark all that apply
<input type="checkbox"/>	a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
<input type="checkbox"/>	b. Marketer Who First Claims the Used Oil Meets the Specifications

EPA ID Number **NJD002144517**

12. Eligible Academic Entities with Laboratories - Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K

Y <input checked="" type="radio"/>	A. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories - If "Yes", mark all that apply. Note: See the item-by-item instructions for definitions of types of eligible academic entities
<input type="checkbox"/>	1. College or University
<input type="checkbox"/>	2. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university
<input type="checkbox"/>	3. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university
Y <input checked="" type="radio"/>	B. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories

13. Episodic Generation

Y <input checked="" type="radio"/>	Are you an SQG or BSQG generating hazardous waste from a planned or unplanned episodic event, lasting no more than 60 days, that moves you to a higher generator category. If "Yes", you must fill out the Addendum for Episodic Generator.
---	---

14. LQG Consolidation of VSQG Hazardous Waste

Y <input checked="" type="radio"/>	Are you an LQG notifying of consolidating VSQG Hazardous Waste Under the control of the Same Person pursuant to 40 CFR 262.17(f)? If "Yes", you must fill out the Addendum for LQG Consolidation of VSQGs hazardous waste.
---	--

15. Notification of LQG Site Closure for a Central Accumulation Area (CAA) OR Entire Facility

Y <input checked="" type="radio"/>	LQG Site Closure of a Central Accumulation Area (CAA) or Entire Facility
A. <input type="checkbox"/> Central Accumulation Area (CAA) or <input type="checkbox"/> Entire Facility	
B. Expected closure date: _____ mm/dd/yyyy	
C. Requesting new closure date: _____ mm/dd/yyyy	
D. Date closed: _____ mm/dd/yyyy	
<input type="checkbox"/> 1. In compliance with the closure performance standards 40 CFR 262.17(a)(8)	
<input type="checkbox"/> 2. Not in compliance with the closure performance standards 40 CFR 262.17(a)(8)	

16. Notification of Hazardous Secondary Material (HSM) Activity

Y <input checked="" type="radio"/>	A. Are you notifying 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 260.30, 40 CFR 261.4(a), (24), or (27)? If "Yes", you must fill out the Addendum to the Site Identification Form for Managing Hazardous Secondary Material.
Y <input checked="" type="radio"/>	B. Are you notifying 40 CFR 260.43(a)(4)(iii) that the product of your recycling process has levels of hazardous constituents that are not comparable to or unable to be compared to a legitimate product or intermediate but that the recycling is still legitimate? If "Yes", you may provide explanation in Comments section. You must also document that your recycling is still legitimate and maintain that documentation on site.

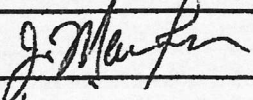
17. Electronic Manifest Broker

Y <input checked="" type="radio"/>	Are you notifying as a person, as defined in 40 CFR 260.10, electing to use the EPA electronic manifest system to obtain, complete, and transmit an electronic manifest under a contractual relationship with a hazardous waste generator?
---	--

13. Comments (include item number for each comment)

Public Notes:

19. Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Operator, Owner, or an Authorized Representative 	Date (mm/dd/yyyy) 2/26/08
Printed Name Marcus Lewis	Title Director - SHE
Email Lewism@Fraycorp.com	
Signature of Operator, Owner, or an Authorized Representative	Date (mm/dd/yyyy)
Printed Name	Title
Email	

PASSAIC VALLEY SEWERAGE COMMISSION

1 of 10

SEWER USE PERMIT

Permit #

20200049

(Please use the Permit Number on any correspondence with PVSC)
In compliance with the provisions of the Federal Water Pollution Control Act, its
amendments, the Clean Water Act and Rules and Regulations of the Passaic Valley
Sewerage Commission.

TROY CHEMICAL CORPORATION, INC.

(herein, after referred to as the Permittee)
is authorized to discharge from a facility located at

1 AVENUE L

NEWARK, NEW JERSEY 07105

to the Passaic Valley Sewerage Commission Treatment Works in accordance with
discharge limitations, monitoring requirements and other conditions set forth
herein.

EFFECTIVE DATE

05/01/2016

EXPIRATION DATE

04/30/2021

PASSAIC VALLEY SEWERAGE COMMISSION

BY

Gregory A. Tramontozzi
Executive Director

BLANK

SECTION A

CONDITION SPECIFIC TO THIS PERMIT

1. Sampling

- 1.1 Samples and measurements taken as required under this permit shall be representative of the monitored activity. All samples shall be taken at the monitoring points approved by the PVSC and specified in this permit. Unless other wise specified, all samples shall be drawn by a 24-hour composite sampler acceptable to the PVSC which shall be equipped with attachments appropriate for affixing seals. During and after collection, the sample shall be maintained between $1^{\circ}\text{C} - 4^{\circ}\text{C}$.
- 1.2 In addition to the other sample requirements set forth in SECTION A, PART 2 of this permit, the Permittee shall comply with the following:
- (a) A one quart or one liter aliquot shall be set aside by 9.00 a.m. for Outlet (s) # 1 operating day and immediately refrigerated. A PVSC Representative may pick up this sample during the day. Any sample not picked up by the PVSC may be discarded at 5:00 p.m. on that day.
- For User Charge the Permittee shall install a 24 hour composite sampler on Outlet (s) # 1 which shall be maintained in proper working order at all times.
- (b) Samples that are taken for heavy metal analysis must be drawn by an automatic 24 hour composite sampler. A grab sample is not acceptable for metals compliance determination.

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PASSAIC VALLEY SEWERAGE COMMISSION
600 WILSON AVENUE
NEWARK, NEW JERSEY 07105

3 of 10

SIU FACT SHEET

Sewer Use Permit to discharge into Passaic Valley Treatment Plant

NAME & ADDRESS OF APPLICANT	NAME AND ADDRESS OF FACILITY WHERE DISCHARGE OCCURS
Troy Chemical Corporation, Inc. 1 Avenue L Newark, New Jersey 07105	Troy Chemical Corporation, Inc. 1 Avenue L Newark, New Jersey 07105

Description of Facility Operations: Mfg. Chemicals for Paint Industry

Million Gallons per Day (MGD) Industrial Wastewater: Approx. – 0.080 MGD

Number of Outlets: Industrial - 2
Sanitary - 0

Sample Point Locations:

40 CFR 455 (Outlet#1A): The Sample Point is located outside building #71 in the distribution collection sump.

PVSC Local Limit (Outlet#1): The Sample Point is located in a manhole outside in the front yard next to their sewer monitoring shed.

Basis for Permit Conditions: 40 CFR 455.26 Subpart A (PSES), User Charge & Pretreatment Equipment

Type of Pretreatment Equipment Installed: Continuous pH and LEL Recorders

Duration of Sewer Use Permit: 5 Years

Special Conditions or Remarks: Revision. Changed permittee to concentration based categorical limitations & updated PVSC's Local limits. This company is subject to the Organic Pesticide Chemicals Manufacturing Categorical Pretreatment Standard 40 CFR 455 and PVSC Local Limits.

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2.

MONITORING REQUIREMENTS AND DISCHARGE LIMITATIONS

- (a) Beginning (05/01/2016) and lasting through (04/30/2021) the Permittee is authorized to discharge from outlet # (20200049-1). Such discharge shall be monitored as specified below. The table lists the limitations or procedures applicable to this outlet. The volume shall be determined from flowmeter readings on process discharge plus meter readings for domestic discharge which will equal total volume discharged. The sample point is located in a manhole outside in the front yard next to their sewer monitoring shed. The Permittee shall submit volume and analysis results in accordance with PVSC User Charge Self-Monitoring Report Form MR-2.

EFFLUENT CHARACTERISTIC PARAMETER	DISCHARGE LIMITATIONS			MONITORING REQUIREMENTS	
	MONTHLY AVERAGE	DAILY MAX	MEASUREMENT FREQUENCY	SAMPLE TYPE	REPORTING PERIOD
BOD	XXXXXX	XXXXXX	Twice/Month	24 hr. comp.	Monthly
TSS	XXXXXX	XXXXXX	Twice/Month	24 hr. comp.	Monthly
pH	XXXXXX	5 to 10.5	Continuous	Recorder	*
LEL**	XXXXXX	XXXXXX	Continuous	Recorder	*
Volume	XXXXXX	XXXXXX	XXXXXX	XXXXXX	Monthly

*

Permittee to store pH & LEL Recorder Charts and have available for review by PVSC personnel on demand.

**

Regulated as defined in Appendix B, Pretreatment Limitation #2 of PVSC Rules and Regulations.

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2. **MONITORING REQUIREMENTS AND DISCHARGE LIMITATIONS**

- (b) Beginning (05/01/2016) and lasting through (04/30/2021) the Permittee is authorized to discharge from outlet # (20200049-1). Such discharge shall be monitored as specified below. The table lists the limitations or procedures applicable to this outlet. The volume shall be determined from flowmeter readings on process discharge plus meter readings for domestic discharge which will equal total volume discharged. The sample point is located in a manhole outside in the front yard next to their sewer monitoring shed. The Permittee shall submit volume and analysis results in accordance with PVSC Pretreatment Discharge Monitoring Form MR-1.

PVSC LOCAL LIMITS	DISCHARGE LIMITATIONS		MONITORING REQUIREMENTS		
	MONTHLY AVERAGE	DAILY MAX	MEASUREMENT FREQUENCY	SAMPLE TYPE	REPORTING PERIOD
Non-Polar Material (SGT-HEM)	100 mg/l	150mg/l	Monthly	Grab*	Monthly
Volume	XXXXXX	XXXXXX	XXXXXX	XXXXXX	Monthly

* Sampling procedure must be in accordance with those specified by N.J.D.E.P.. Analysis procedure as defined by E.P.A. Method 1664 Revision A.

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2. **MONITORING REQUIREMENTS AND DISCHARGE LIMITATIONS**

- (b) Beginning (05/01/2016) and lasting through (04/30/2021) the Permittee is authorized to discharge from outlet # (20200049-1A). Such discharge shall be monitored as specified below. The table lists the limitations or procedures applicable to this outlet. The volume shall be determined from batch flow meter totalizer. The sample point is located outside building #71 in the wastewater treatment room. The Permittee shall submit volume and analysis results in accordance with PVSC Pretreatment Discharge Monitoring Report Form MR-1.

40 CFR 455.26 Subpart A(PSES)

EFFLUENT CHARACTERISTIC	DISCHARGE LIMITATIONS		MONITORING REQUIREMENTS		REPORTING PERIOD
	MONTHLY AVERAGE	All units are in UG/L DAILY MAX.	MEASUREMENT FREQUENCY	SAMPLE TYPE	
Volume * (a)	XXXXXX	XXXXXX	Monthly	XXXXXX	Monthly
	(a)	(a)	Monthly	(a)	Monthly

- (a) See Page 9 of 10, Section A-3 G of this Permit for Effluent Characteristics, Daily and Monthly Discharge Limitations, and Sample Type.

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2. MONITORING REQUIREMENTS AND DISCHARGE LIMITATIONS

- (b) Beginning (05/01/2016) and lasting through (04/30/2021) the Permittee is authorized to discharge from outlet # (20200049-1). Such discharge shall be monitored as specified below. The table lists the limitations or procedures applicable to this outlet. The volume shall be determined from flowmeter readings on process plus meter readings for domestic which will equal total volume discharged. The sample point is located in a manhole outside in the front yard next to their sewer monitoring shed. The Permittee shall submit volume and analysis results in accordance with PVSC Pretreatment Discharge Monitoring Report Form MR-1.

PVSC LOCAL LIMITS		MONITORING REQUIREMENTS				
PARAMETER	DISCHARGE LIMITATIONS	mg/l DAILY MAXIMUM	mg/l THRESHOLD VALUE	MEASUREMENT FREQUENCY	SAMPLE TYPE	REPORTING PERIOD
Cu	3.98		0.40	Monthly	24 hr. comp.	Monthly
Pb	1.3		0.10	Monthly	24 hr. comp.	Monthly
Hg	0.06		0.006	Monthly	24 hr. comp.	Monthly
Ni	3.12		0.30	Monthly	24 hr. comp.	Monthly
Zn	3.81		0.35	Monthly	24 hr. comp.	Monthly
Volume	XXXXXX		XXXXXX	XXXXXX	XXXXXX	Monthly

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3. SCHEDULE OF COMPLIANCE

The Permittee is required to meet the following schedule of compliance:

- A. Analysis of wastewater parameters shall be performed by a laboratory that has been certified by the State of New Jersey. Permittee is required to submit all certified analyses as an attachment to the monthly MR-1 and/or MR-2 report.
- B. The Permittee is required to submit as an attachment to the MR-1 and/or MR-2 report monthly, a water balance showing meter readings used to calculate the reported volume discharged.
- C. Permittee to submit a periodic compliance monitoring report MR-2 form for monthly reporting requirements within twenty-one (21) days after the end date of each preceding month.
- D. Permittee to be in compliance with PVSC Local Limits.

Permittee to submit a periodic compliance monitoring report MR-1 form for monthly reporting requirements within thirty-five (35) days after the end date of each preceding month in accordance with General Pretreatment Regulations 40 CFR 403.12 section (e).

- E. If the Permittee has been authorized by the PVSC to certify for non-use for one or more heavy metals, the Permittee must sample the discharge in March and September of each year in order to prove continued compliance. If any analytical results exceeds the Threshold Value, but not the Local Limit, the Permittee shall analyze a sample each succeeding month until three successive monthly results are at or below the Threshold Value stated in the PVSC Rules and Regulations Section B-103.3 Table B-2.
- F. Pretreatment Compliance Requirements - Pesticide Chemicals Manufacturing Categorical Pretreatment Standard 40 CFR 455.

Permittee to be in compliance with Pesticide Chemicals Manufacturing Categorical Pretreatment Standard 40 CFR 455.26 Subpart A (PSES)

Permittee to submit a periodic compliance monitoring report MR-1 form for monthly reporting requirements within thirty-five (35) days after the end date of each preceding month in accordance with General Pretreatment Regulations 40 CFR 403.12 section (e).

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G.

ADDITIONAL REQUIREMENTS SECTION A-3 CONTINUED:

	Troy Chemical	REGULATION		SAMPLE TYPE
	40CFR455	CONCENTRATIONS		
	EFFLUENT	LIMITS ug/l		GRAB/ COMPOSITE
#		CHARACTERISTICS	AVG	
1	1,1-Dichloroethylene	22	60	GRAB
2	1,1,1-Trichloroethane	22	59	GRAB
3	1,2-trans-Dichloroethylene	25	66	GRAB
4	1,2-Dichlorobenzene	196	794	COMPOSITE
5	1,2-Dichloropropane	196	794	GRAB
6	1,2-Dichloroethane	180	574	GRAB
7	1,3-Dichloropropene	196	794	GRAB
8	1,4-Dichlorobenzene	142	380	COMPOSITE
9	Benzene	57	134	GRAB
10	Bromodichloromethane	142	380	GRAB
11	Bromomethane	142	380	GRAB
12	Chlorobenzene	142	380	GRAB
13	Methyl Chloride (Chloromethane)	110	295	GRAB
14	Total Cyanide	220	640	GRAB
15	Dibromochloromethane	196	794	GRAB
16	Dichloromethane (Methylene Chloride)	36	170	GRAB
17	Ethylbenzene	142	380	GRAB
18	Total Lead	320	690	COMPOSITE
19	Naphthalene	19	47	COMPOSITE
20	Tetrachloroethylene	52	164	GRAB
21	Tetrachloromethane (Carbontetrachloride)	142	380	GRAB
22	Toluene	28	74	GRAB
23	Tribromomethane (Bromoform)	196	794	GRAB
24	Trichloromethane (Chloroform)	111	325	GRAB

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SECTION A-3 SCHEDULE OF COMPLIANCE CONTINUED

- I. Permittee must operate in accordance with its 09/12/2005 approved Slug Control plan.
- I. When possible the discharge of process wastewater shall be conducted only during dry weather, so as to minimize the impact on Combined Sewer Overflows. In these cases, the permittee shall make provisions to store or cease such flows during wet weather events.
- J. Sampling Waiver Applicability

The permittee has been identified as subject to 40 CFR 455.26 Subpart A (PSES), the Federal Categorical Pretreatment Standards for Existing Sources under the the Organic Pesticide Chemicals Manufacturing Subcategory. The permittee may, in accordance with 40 CFR 403.12(e)(2), seek to forego sampling of a pollutant regulated under the applicable categorical standard provided that it meets the conditions noted in the PVSC Rules and Regulations under Section 318.5.
- K. The Permittee shall notify in writing, all agencies as directed by 40 CFR 403.12 (p) of any discharges classified hazardous waste under 40 CFR 261.

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SECTION B
CONDITIONS APPLICABLE TO ALL PERMITS

1. GENERAL

- 1.1 The Permittee shall comply with all conditions set forth in this permit and all applicable requirements which are set forth in N.J.S.A. 58:14-1 et seq. and the Rules and Regulations of the PVSC, as well as the Federal Clean Water Act, 33 U.S.C.A. § 1251 et seq. and the New Jersey Water Pollution Control Act, N.J.S.A. 58:10A-1 et seq. Failure to comply with all the terms and conditions of this permit shall constitute a violation of the Rules and Regulations of the PVSC.
- 1.2 All discharges shall be consistent at all times with the terms and conditions of this permit and no regulated pollutant shall be discharged more frequently than authorized or at a level in excess of that which is authorized by this permit.
- 1.3 The Permittee shall not discharge or deposit or cause or allow to be discharged or deposited into the Treatment Works or public sewer, any waste which causes or contains the following
- (a) **Explosive Wastes** - Wastes in such quantity which may create a fire or explosion hazard to the Treatment Works, collection system or to the operation of the system, including but not limited to, wastewater with a closed cup flashpoint of less than 140 degrees Fahrenheit or 60 degrees Centigrade using the test methods specified in 40 CFR 261.21. Additional quantitative limitations on explosive wastes are specified in Appendix B, Pretreatment Limitation #2, B-201 of the PVSC Rules & Regulations.
 - (b) **Corrosive Wastes** - Wastes in such quantity which may cause corrosion or deterioration of the Treatment Works. Unless a higher limit is otherwise stated in the Sewer Use Permit issued to a user, all wastes shall have a pH not less than 5. Unless otherwise stated in the Sewer Use Permit, all wastes shall have a pH not more than 10.5. If PVSC requires the installation of a continuous pH recorder, the Permittee may exceed the upper or alkaline pH limit subject to the conditions contained in subsection 317. Prohibited materials include, but are not limited to, acids, sulfides, concentrated chloride or fluoride compounds, etc.

- (c) **Solids or Viscous Wastes** - Solids or viscous wastes in amounts which may cause obstruction to the flow in a sewer, or otherwise interfere with the proper operation of the Treatment Works. Prohibited materials include, but are not limited to, uncomminuted garbage, bones, hides, or fleshings, cinders, sand, stone or marble dust, glass, etc.
- (d) **Floatable Pollutants** - (1) Petroleum oil, non-biodegradable cutting oil, or products of mineral oil origin in amounts that will cause interference or pass through, (2) any wastes containing floatable fats, wax, grease, oils, or any other floatable pollutants, (3) any industrial wastes containing more than 150 mg/l daily max and /or 100 mg/l monthly average of petroleum based oil or grease.
- (e) **Noxious Materials** - (1) Pollutants which result in the presence of toxic gases, vapors or fumes within the POTW in a quantity that may cause acute worker health and safety problems, (2) noxious liquids, or gases, which in sufficient quantity either singly or by interaction with other wastes, are capable of creating a public nuisance or hazard to life, or are or may be sufficient to prevent entry into a sewer for its maintenance and repair.
- (f) **Radioactive Wastes** - Radioactive wastes or isotopes of such half-life or concentration that they do not comply with regulations or orders issued by the appropriate authority having control over their use and which will, or may, cause damage or hazards to the Treatment Works or personnel operating the system.
- (g) **Interference/Pass through** - Any waste, including discharges of oxygen demanding wastes (BOD, etc.) released or discharged at a flow rate and/or pollutant concentration which causes or threatens to cause an upset at the PVSC Treatment Works, or which causes or threatens to cause a violation of the PVSC's NJPDES Permit conditions.
- (h) **Excessive Discharge Rate** - Industrial wastes discharged in a slug or such volume or strength so as to cause a treatment process upset and subsequent loss of treatment efficiency.

- (i) **Heat** - (1) Any discharge in excess of 150°F (65°C). (2) Heat in amounts which would inhibit biological activity in the PVSC Treatment Works resulting in a treatment process upset and subsequent loss of treatment efficiency.
- (j) **Unpolluted Waters** - Any unpolluted water including, but not limited to, cooling water and uncontaminated storm water, which will increase the hydraulic load on the Treatment System, unless specifically authorized by PVSC in accordance with Sections 301, 303 and 602.5 of these Rules and Regulations.
- (k) **Dilution** - Increase in the use of process water, or an attempt in any other way, to dilute a discharge as a partial or complete substitute for adequate treatment to achieve compliance with a pretreatment standard or effluent limit.
- (l) **Violations** - Wastes, which cause the PVSC treatment plant to violate its NJPDES Permit, applicable, receiving water standards, permit regulating sludge which is produced during treatment or any other Permit issued to PVSC.
- (m) **Hazardous Wastes** - Those wastes designated by EPA as hazardous under 40 CFR 261.
- (n) **Trucked Pollutants** - Any trucked or hauled pollutant, accepted at discharge points designated by the Chief Executive Officer, and only after approval is issued by PVSC.
- (o) **Ground Water** - Any ground water, whether contaminated or uncontaminated, unless specifically authorized by PVSC in accordance with Sections 301, 303, and 602.5 of these Rules and Regulations.
- (p) **Stormwater** - Any stormwater, whether contaminated or uncontaminated, unless specifically authorized by PVSC in accordance with Sections 301, 303 and 602.5 of these Rules and Regulations.

- (q) **Bypassed Wastes** – Any wastewaters which would normally be monitored or pretreated, but are discharged to the sanitary sewer without being monitored or pretreated, unless specifically authorized by PVSC.
- (r) **Excess Heel Material** – Any quantity of trucked or hauled material meeting the definition as contained herein, unless authorized by PVSC.

1.4 The Permittee shall not discharge or convey or permit to be discharged or conveyed to the PVSC Treatment Works any wastes containing pollutants of such character or quantity that.

- (a) Impairs the PVSC's ability to protect the health and safety of the treatment plant workers.
- (b) Will not be susceptible to treatment or will interfere with the process or efficiency of the Treatment Works.
- (c) Violate any federal categorical pretreatment standard. As pretreatment standards for toxic or other hazardous pollutants are promulgated by USEPA for a given industrial category, all industrial users within that category shall conform to the USEPA timetable as well as any numeric limitations imposed by the USEPA.
- (d) Violate a local limit imposed or adopted by the PVSC.
- (e) Violate a Best Professional Judgment limit imposed or adopted by the PVSC.
- (f) Cause the PVSC treatment plant to violate its NJPDES Permit, applicable receiving water standards, regulations and/or any permits governing sludge which is produced during treatment process, or any other permit issued to the PVSC.

1.5 The Permittee shall at all times maintain in good working order and operate all pretreatment control and monitoring equipment in strict accordance with all design specifications and manufacturer recommendations. Proper operation and maintenance includes, at a minimum, effective performance based upon specifications designed to meet applicable effluent limits, adequate funding, adequate operator staffing and training and adequate laboratory and process controls.

- 1.6. The Permittee shall dispose of all solids, sludges, filter backwash or other pollutants or hazardous waste removed in the course of pretreatment or control of wastewaters and/or the treatment of the intake waters, in accordance with applicable Federal, State and local laws and regulations. Records documenting such disposal shall be made available to the PVSC for review upon request.
- 1.7. An Upset shall constitute an affirmative defense to an action brought for non-compliance if the following requirements are met. If the Permittee wishes to establish the affirmative defense of Upset, it shall demonstrate, through properly signed, contemporaneous operating logs or other relevant evidence that (1) an Upset occurred and the User can identify the cause(s) of the Upset; (2) the facility was at the time being operated in a prudent and workmanlike manner and in compliance with applicable operations and maintenance procedures; and (3) the Permittee has submitted the following information to PVSC within 24 hours of becoming aware of the Upset, except that a written submission must be provided within five days if the information is provided verbally:
 - (a) A description of the indirect discharge and cause of the non-compliance;
 - (b) The period of non-compliance including exact dates and time or, if not corrected, the anticipated time the noncompliance is expected to continue;
 - (c) Steps being taken and/or planned to reduce, eliminate and prevent recurrence of the non-compliance.

If the Permittee seeks to establish the occurrence of an Upset, it shall have the burden of proof. The User shall control production on all discharges to the extent necessary to maintain compliance with the prohibitions or limitations upon reduction, loss or failure of its pretreatment facility until it is restored or an alternative method of treatment is provided. This requirement shall apply to the situation where among, other things, the primary source of power to the pretreatment facility is reduced, lost or fails.

- 1.8 Bypass means the intentional diversion of wastestreams from any portion of the Permittee's treatment facility. Regarding notice:
- (a) If the Permittee knows in advance of the need for a bypass, it shall submit prior notice to PVSC, if possible at least ten days before the date of the bypass.
 - (b) The Permittee shall submit oral notice of an unanticipated bypass that exceeds applicable Pretreatment Standards to PVSC within 24 hours from the time it becomes aware of the bypass. A written submission shall also be provided within 5 days of the time the Permittee becomes aware of the bypass. The written submission shall contain a description of the bypass and its cause; the duration of the bypass, including exact dates and times, and, if the bypass has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent reoccurrence of the bypass. PVSC may waive the written report on a case-by-case basis if the oral report has been received within 24 hours.

2. INDUSTRIAL WASTE REPORTING

- 2.1 **USER CHARGE:** User Charge monitoring results obtained during the previous month shall be reported monthly on a Discharge Monitoring Report Form (MR-2). The due date for properly signed reports shall be 21 days after the reporting period ends. If the 21st day falls on a Saturday, Sunday or PVSC Holiday, then the report shall be due on the next PVSC work day. If the Permittee fails to submit the MR-2 Report on a timely basis the Executive Director shall estimate the usage for the period. The estimate may be made thirty (30) days after the due date of the report.
- 2.2 **PRETREATMENT:** Pretreatment monitoring results obtained during the previous month shall be reported monthly on a Discharge Monitoring Report Form (MR-1). The due date for properly signed reports shall be 35 days after the reporting period ends. If the 35th day falls on a Saturday, Sunday or PVSC Holiday, then the report shall be due on the next PVSC work day.

2.3 **DUE DATE:** MR-1 and MR-2 Reports must be physically delivered to the PVSC by Midnight of the date by which they are due. The use of certified mail or other means to document or guarantee delivery may be used if deemed necessary. Postmarks are not valid to demonstrate compliance with the due date requirement.

2.4 **MAILING ADDRESS:** Reports required herein must be addressed to:

**PASSAIC VALLEY SEWERAGE COMMISSION
ATTN: USER CHARGE & PERMIT MANAGEMENT
600 WILSON AVENUE
NEWARK, NEW JERSEY 07105**

2.5 **FACSIMILE / ELECTRONIC MAIL:** The Permittee may meet the requirement for submission by sending the report(s) via facsimile or electronic mail provided the report is received at the PVSC on any date up to and including the due date.

2.6 **ANALYTICAL PROCEDURES:** Analytical results for BOD, TSS or any other parameter as required by this permit shall be reported on the date that the sample was removed from the sampling device for analysis. The following procedure shall be used when reporting analytical results:

- (a) The pollutant limit will define the precision, or number of digits to the right or left of the decimal point, to be reported.
- (b) Calculated results shall be rounded off to the same precision as defined for that pollutant in the limit.
- (c) Zeros in the pollutant limit are included in order to determine the precision.
- (d) The following procedure shall be followed when rounding off results:
 - (i) Round off by dropping digits that are irrelevant. If the digit 6,7,8 or 9 is to be dropped, increase the preceding digit by one unit.
 - (ii) If the digit 0,1,2,3 or 4 is to be dropped, do not alter the preceding digit.
 - (iii) If the digit 5 is to be dropped, round off the preceding digit to the nearest even number (2.25 becomes 2.2 while 2.35 becomes 2.4).

- 2.7 **RECORDING OF RESULTS:** For each measurement of a sample taken pursuant to the requirements of this permit, the Permittee shall maintain a record of the following information:
- (a) The date, exact places and time of sampling;
 - (b) The dates the analysis were performed;
 - (c) The person(s) who performed the analysis;
 - (d) The analytical techniques or methods used; and
 - (e) The results of all required analyses.
- 2.8 **RECORDS RETENTION:** The Permittee shall maintain such records as necessary to demonstrate compliance with the requirements of this permit, the PVSC Rules and Regulations and any applicable State or Federal Pretreatment standard or requirement. All records and information resulting from the monitoring activities required by this permit including, all records of analysis performed, calibration and maintenance of instrumentation and recording from continuous monitoring instrumentation, shall be retained for a minimum of five years.
- 2.9 **SEWER USE APPLICATION (SUA) RENEWAL:** The Permittee shall submit a renewal SUA within 180 days of the expiration of current Sewer Use Permit.

3. **INDUSTRIAL WASTE MONITORING**

- 3.1 **MONITORING EQUIPMENT:** The Permittee shall install, at his own cost and expense, whatever monitoring equipment is required by the conditions of this permit to facilitate the accurate observation, sampling and measurement of the discharge. Such equipment shall be kept safe, secured from unauthorized entry or tampering and accessible at all times. Monitoring equipment shall be calibrated as recommended by the manufacturer, except that LEL recorder shall be calibrated daily and pH recorders shall be calibrated at least weekly, whichever is more frequent.
- 3.2 Permittee shall safeguard any PVSC monitoring equipment that is installed at their facility. Permittee shall reimburse PVSC for any equipment that is either damaged or stolen from its point of installation. Reimbursement costs will be determined by PVSC.

- 3.3 The volume of each sample shall be proportional to the discharge flow rates unless specifically modified by PVSC. For a 24 hour continuous discharge, a minimum of 24 individual samples shall be collected at equal intervals and at least once per hour. For a continuous discharge of less than 12 hours, individual samples shall be taken at least once every 30 minutes. For discharges which are not continuous, individual samples shall be taken such that they will be representative of the plant waste water discharge.
- 3.4 Permittee shall notify the PVSC as soon as possible, but in no case later than 2 hours from becoming aware of the same, if a sampling, monitoring, recording or other device required in accordance with this permit becomes inoperable. Unless otherwise directed by the PVSC, the Permittee shall submit a written report to the PVSC, attention Industrial and Pollution Control Department, within 5 working days of the occurrence detailing what occurred, why it happened, what will be done to correct the problem and a date when the problem will be corrected. If the PVSC approves the corrective action and it is expected to take more than two months from the date of occurrence to complete, the Permittee shall submit monthly progress reports until such time as the problem is corrected.
- 3.5 **NOTIFICATION OF NON-COMPLIANCE:** If, for any reason, the Permittee does not comply with or will be unable to comply with any effluent limitation specified in this permit, or discharges any waste and meets the Slug Discharge Definition as defined in Appendix A, of the PVSC Rules and Regulations, including any changes at its facility affecting the potential for a slug discharge, the Permittee shall notify the PVSC within 24 hours of such occurrence.
- 3.6 If this report is made orally, a written report containing the following information, shall be submitted within five (5) working days:
- (a) A description of the discharge and the cause of the period of noncompliance;
 - (b) The period of noncompliance, including exact dates and times; or, if not corrected, the anticipated time the non-compliance is expected to continue, and
 - (c) The steps being taken to reduce, eliminate and prevent a recurrence of the non-complying discharge.

- 3.7 The Permittee shall take all reasonable steps to minimize any adverse impact to the PVSC Treatment Works resulting from noncompliance with any pretreatment limitations specified in this permit, including such accelerated or additional monitoring as necessary to determine the nature and impact of the non-complying discharge. This condition in no way affects PVSC's right to suspend a permit in order to stop a discharge which presents an imminent or substantial hazard to the public health, safety or welfare to the local environment or which interferes with the operation of the PVSC Treatment Works.
- 3.8 **TEST PROCEDURES:** Samples and measurements taken as required in this permit shall be representative of the volume and nature of the monitored discharge.
- 3.9 The Permittee shall perform all analyses in accordance with the test procedures identified under 40 C.F.R. Part 136. All test procedures, other than those identified in 40 C.F.R. Part 136, shall be considered as alternative test procedures. The Permittee is authorized to utilize an alternative test procedure only if prior written approval is received from the Chief Executive Officer in accordance with Section 319.2 of the Rules and Regulations of the PVSC.
- 3.10 Sample analyses of pollutants required by this permit shall be performed by a laboratory with a New Jersey certification for each pollutant analyzed.
- 3.11 If the Permittee monitors any pollutant at the location(s) designated more frequently than required by this permit using the approved analytical methods as specified above, the results of such monitoring shall be included in the calculation and reporting of the values required in the applicable Discharge Monitoring Report Form (PVSC Form MR-1 or MR-2). Such increased frequency shall also be indicated.
- 3.12 PVSC may authorize the Permittee to forego sampling of a pollutant regulated by its categorical Pretreatment Standard(s) if the Permittee has demonstrated through sampling and other technical factors that the pollutant is neither present nor expected to be present in the discharge, or is present only at background levels from intake water and without any increase in the pollutant due to activities of the Permittee. This authorization would be subject to the conditions cited at 40 CFR 403.12(e)(2)(i) through (vii). The following language shall be included in the control mechanisms for any Categorical Industrial User unless a sampling waiver has previously been granted:

"The Permittee has been identified as subject to 40 CFR 4XX.XX, the Federal Categorical Pretreatment Standards for Existing sources under the _____ Point Source Category. The Permittee may, in accordance with 40 CFR 403.12(e)(2), seek to forego sampling of a pollutant regulated under the applicable categorical standard provided that it meets the conditions noted in the PVSC Rules and Regulations under Section 318.5."

4. MANAGEMENT RESPONSIBILITIES

- 4.1 **RIGHT OF ENTRY:** The Permittee shall allow the authorized representatives of the PVSC, upon presentation of credentials to:
- (a) Have immediate access to all the facilities directly or indirectly connected to the PVSC Treatment Works during normal working hours and at such other times as may be necessary during emergencies as determined by PVSC. No person shall interfere with, delay, or refuse entrance to a PVSC Inspector attempting to inspect the facility.
 - (b) Inspect the monitoring equipment and monitoring methods required in this permit or to sample any discharge of wastewater, copy any records required to be kept by this permit or PVSC Rules and Regulations and inspect and/or sample RCRA or other type waste or substances.
- 4.2 **TRANSFER OF OWNERSHIP OR CONTROL:** This Permit is not transferable. This permit shall not be reassigned, transferred or sold to a new owner, new industrial user, or a new or changed operation. The Permittee shall notify the Chief Executive Officer in writing within (14) days of any sale or transfer of the industrial operations/facility covered by this Permit, or of any sale or transfer affecting the identity of those holding a controlling interest in the Permittee. The Permittee shall also provide written notice to the succeeding owner or controller of the existence of this Sewer Use Permit and the need to apply for a new permit. For purposes of this provision, the term "controlling interest" shall mean an interest held by a person or entity, or group of persons or entities, who possess, directly or indirectly, the power to direct or cause the direction of the management and policies of the Permittee.

- 4.3 **CHANGE IN DISCHARGE:** Any change in the discharge, any anticipated facility expansion, production increases, or modification which will result in new, different, or increased discharges of pollutants regulated by PVSC must be reported by submission of a new Passaic Valley Sewerage Commission Sewer Use Application. If such changes will not violate the effluent limitations specified in this permit, then notice only to PVSC of such changes is required. Following such notice the permit may be modified to specify and limit any pollutants not previously limited.

All Industrial Users shall promptly notify the PVSC in advance of any substantial change in the volume or character of pollutants in their discharge.

5. **OTHER CONDITIONS**

- 5.1 **PERMIT MODIFICATION:** After notice and opportunity for a hearing, this permit may be modified, or revoked in whole or in part during its term for cause including, but not limited to the following:
- (a) Violating any terms or condition of this permit;
 - (b) Obtaining this permit by misrepresentation or failure to disclose fully all relevant facts; or
 - (c) A change in any condition that requires either a temporary or permanent reduction or elimination of the authorized discharge.
- 5.2 **TOXIC POLLUTANTS:** Notwithstanding Section A Part 2 of this permit, if a toxic effluent standard or prohibition (including any schedule of compliance specified in such effluent standard or prohibition), is established under Section 307(b) of the Federal Water Pollution Control Act, its amendments, or any other subsequent law or regulation for a toxic pollutant which is present in the discharge, and such standard or prohibition is more stringent than any limitation for such pollutant in this permit, this permit shall be revised or modified in accordance with the toxic effluent standard or prohibition and the Permittee so notified.
- 5.3 **CIVIL AND CRIMINAL LIABILITY:** A violation of the PVSC Rules and Regulations or a violation of any term or condition contained in this Sewer Use Permit may subject the Permittee to enforcement and civil penalties of up to \$50,000 per day for each violation, and each day's continuance of the violation shall constitute a separate violation. Enforcement may include the institution of a civil action for injunctive relief and/or to recover civil penalties and/or referral to the appropriate agency for criminal enforcement.

- 5.4 **STATE LAWS:** Nothing in this permit shall be construed to preclude the institution of any legal action or relieve the Permittee from any responsibilities, liabilities, or penalties established pursuant to any applicable State Law or regulation under authority preserved by Section 510, (33 U.S.C.A. § 1370) of the Federal Water Pollution Control Act as amended.
- 5.5 **PROPERTY RIGHTS:** The issuance of this permit does not convey any property rights in either real or personal property, or any exclusive privileges, nor does it authorize any injury to private property or any invasion of personal rights, nor any infringement of Federal, State or local laws or Regulations.
- 5.6 **SEVERABILITY:** The provisions of this permit are severable, and if any provision of this permit, or the application of any provision of this permit to any circumstance, is held invalid, the application of such provision to other circumstances, and the remainder of this permit shall not be affected thereby.
- 5.7 **DEFINITIONS:** The following definitions apply to this permit:
- (a) "Composite" - a combination of individual samples obtained at regular intervals over the entire discharge day.
 - (b) "Daily" - each operating day.
 - (c) "Daily Maximum Discharge" - the highest discharge by weight or other appropriate units, as specified herein, during any calendar day.
 - (d) "Grab" - an individual sample collected in less than 15 minutes.
 - (e) "Immediate Access" - access without delay but in no event beyond 10 minutes from the time the request is made known to the guard or employee.
 - (f) "Monthly" - one day each month during a normal operating day.
 - (g) "Monthly Average Value" - the sum of all daily discharges measured during a calendar month divided by the number of daily discharges measured during the month. Results may be expressed in mass loadings per day or concentration. The monthly average value does not apply to those parameters that are continuously monitored.
 - (h) "N/A" - not applicable.
 - (i) "Quarterly" - every three (3) months.
 - (j) "Weekly" - one day each week during a normal operating day.

Physical Inventory Record Sheet

7/18/2019

6/30/2019

Warehouse:

Prod. #	Material Name	Pack Size	Lot Number	Physical Count	Comments
200602	TROYCAR FE01	30kgs	15086105 SP	11	11 Net 63 Btl's
10334394	NUOSEPT SIS R	24.3 lbs	A074F5M701	12	NI B
108049	PE678/DIGUON (use only for 663 REWORK) Lot #		17015901		NI B
830108	NUOSEPT 498 PRESERVATIVE	1 tote			OK
106208	PolyPhase AS40LV	2800lbs	17107778T	1 tote	OK
522019	Micropel 2-DIDP	2150lbs	17087494+	1 tote	6450 Btl's
2	MERGA 753 (mix)	2	?	1 DRUM	
50539	AMERSTAT 259 JR	450	001794172D	30 RUN	NI B
50539	AMERSTAT 259 DR	450	00018147500	30 RUNS	NI B
2	MERGA 753	2	2	1 Bucket	
2	PolyPhase P-100 (lumps)	2	2	1 Bucket	
521017	Micropel SPV	350 lbs	1601026 PD	20 RUNS	NI B
302113	MERGA K-14	441 lbs	17087439D	20 RUNS	NI B
5979	MERGA EX40	391 lbs	12042374	30 RUNS	NI B
2	TROYCAR FE10 Lot # N3	2	901212001	30 Btl's + 2 Bucket	
10334392	TROYCAR FE10	451 lbs	180695808	30 Btl's	Btl's 4
1027318C	TROYCAR FE10	451 lbs	17036262P	20 Btl's	NI B
	SALTAGE DRUM (yellow)		1 DRUM		
	2 totes (unknown)				
828026	FUNGITRO 920 Fungicide	2	17026153T	1 tote	NI B
223749	MERGA K10N	2	17107829	3 tote	NI B
101331	MERGA S30	441 lbs	16095046P	70 Btl's	NI B

Physical Inventory Record Sheet

6/30/2019

Warehouse:

Prod. #	Material Name	Pack Size	Lot Number	Physical Count	Comments
13178	ZIRCONIUM 12WD	2000lbs	14114686st	1 tote	NIB
828039	Fungitrol 940 B	2.	16084878	2 tote	NIB
302110	HERGAL K-14	2.	13127166+	1 tote	NIB
648323	ROYKID D720	385 ^{lbs}	10098665-D	4	NIB
106164	PolyPhase RW40	550lbs	16013167D	4	N
828021	Fungitrol 920 Fung	2.	1706087	1 tote	OK
2 R 19030	FLB Ronic P103 RW400	2.	0013518569	2 DRUMS	OK
4018	HERGAL 395	2.	14017221+	1 tote	OK
106208	PolyPhase RW40	2.	2 17107787	1 tote	OK
830147	Nuosept 95	475lbs	16013108D	4	N
5653	PolyPhase R-20T	450lbs	12032170D	2	N
302073	HERGAL 192	450lbs	14099337D	1	N
5653	PolyPhase R-20T	450lbs	13085895D	1	N
5653	PolyPhase R-20T	450lbs	090961455D	4	N
830147	Nuosept 95	475lbs	16013109D	2	N
2.	Rinse water from guns	2.	?	2 DRUMS	N
644268	ROYKID D720	2.	17046501T	1 tote	N
644268	ROYKID D720	2	17046500T	1 tote	N
522018	HERGAL 22DIDP	2150lbs	17087484+	4 tote	OK
522073	Nicrore 5 PPG	450lbs	18018298 D	4	OK
223749	HERGAL K10N	2.	17107829	1 tote	OK
828007	Fungitrol 4405	450lbs	001840807D	1	N

91

3 in BPCS

5 in BPCS

Physical Inventory Record Sheet

6/30/2019

Warehouse:

Prod. #	Material Name	Pack Size	Lot Number	Physical Count	Comments
200602	TRYSARE FE01	65lbs	15086105SP	240	OK
831614	SAG 30 PL 340	39.65lbs	15F9V316	2	OK
831614	SAG 30 PL 340	39.65lbs	15MSV319A	6	OK
70432	1 Pallet of OE PAIL	UN KNOWN		16	
131284	TRYSAN ZPT-38	441lbs	91710027D	1	N
131284	TRYSAN ZPT-38	441lbs	91710026D	1	N
R-15012	ZINC PYRITHIONE	2.	81716025D	2	N
106164	POLYPHASE PU-40	550lbs	16013132D	3	N
106164	POLYPHASE PU-40	550lbs	16033510D	4	N
644323	TRYSAN ZPT-38	385lbs	13065395D	2	N
800602	TRYSAN ZPT-38	65lbs	15086105SP	240	OK
023175N1	TRYSAN ZPT-38	381lbs	161188125D	2	OK
4013	TRYSAN ZPT-38	500lbs	16095033D	1	OK
302110	TRYSAN ZPT-38	2.	13116686T	1	OK
2.	TRYSAN ZPT-38	441lbs	18100524D	4	OK
2.	TRYSAN ZPT-38	441lbs	18100525D	2	OK
2.	TRYSAN ZPT-38	441lbs	18100526D	2	OK
100583	TRYSAN ZPT-38	441lbs	17077157ND	2	OK
106583	TRYSAN ZPT-38	441lbs	17117975ND	1	OK
102293	TRYSAN ZPT-38	450lbs	16054201D	1	OK
2.	TRYSAN ZPT-38	441lbs	19011032P	6	OK

Physical Inventory Record Sheet

6/30/2019

Warehouse:

Prod. #	Material Name	Pack Size	Lot Number	Physical Count	Comments
108013	POLYPHASE 678	441bs	17117994D	1	N
	4 DRUMS UNKN	OWN		4	
603865M1	TROY SOL MS2	400lbs	14033388SD	1	N
6011443	ZIRCONIUM 12	441lbs	15096289SD	1	OK
6008663	TROY MAX ANTI SKIN 8	420lbs	20150618	2	OK N
40215	TROY MAX ANTI SKIN OIL	100lbs	10119243SK	1	N
6008663	TROY MAX ANTI SKIN B	420lbs	14090339	3	N
601403	TROY MAX MANGANESE 12	441lbs	0002210142	1	OK
5655	POLYPHASE P-20T	450lbs	13085896D	4	N
830099	NUOSEPT 4976 DR	440lbs	15081859D	1	N
604973	TROY SOL AFL	400lbs	14023195D	2	N
644323	TROY KYD D 720	385lbs	16023372D	1	N
302113	MERGA K-14	441bs	17118007D	2	OK
302113	MERGA K-14	441bs	17097662D	2	OK
362113	MERGA K-14	441bs	17097677D	1	N
2.	TROY SHIELD EX-4	402.	2.	2.	
5655	POLYPHASE P-20T	450lbs	15102506D	2	N
R-22004	W. MINGRA SPIRIT	2.	38549	4	N
100758	MERGA B10K	2.	16125672+	1 tote	OK
2.	POLYPHASE AFL	2.	2.	1 tote	
106208	POLYPHASE PU-40LV	2800 ^{lbs}	17107778+	1 tote	OK
13178	2.	2,000 ^{lbs}	14114686+	1 tote	N

BACS 2



Material Safety Data Sheet

21080D

Revision Date: 05/30/2008
Issued: 05/30/2008

FUNGITROL® 440S FUNGICIDE

1. CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

Responsible Party: International Specialty Products
1361 Alps Rd.
Wayne, N.J. 07470
U.S.A.
Telephone: (973) 628-4000

Emergency Telephone Number: CHEMTREC: 1-800-424-9300 or 703-527-3887 (Outside of the USA)
(Spill Related Emergencies)
PROSAR: 1-800-241-7439 (Health Related Emergencies)

Prepared By: Product Stewardship

Product Id: 21080D

Product Name: FUNGITROL® 440S FUNGICIDE

CAS Registry Number: 55406-53-6; 64742-95-6; 25265-71-8; 67-68-5

CAS Name: Carbamic acid, butyl-, 3-iodo-2-propynyl ester ; Solvent Naptha (Petroleum), light arom. ; Propanol, oxybis- ; Methane, sulfinylbis-

2. HAZARDS IDENTIFICATION

Emergency Overview

DANGER!
FLAMMABLE LIQUID.
EXTREMELY IRRITATING TO EYES AND MAY CAUSE SEVERE DAMAGE INCLUDING BLINDNESS.
MAY BE FATAL IF INHALED.
MAY BE HARMFUL IF SWALLOWED.
CAUSES MODERATE SKIN IRRITATION.
MAY CAUSE LUNG DAMAGE IF SWALLOWED.

Hazard Overview

Target Organs:

- Respiratory System
- Eyes
- Skin

Primary Route(s) of Exposure: Inhalation. Eyes. Skin.

Acute Health Hazards: Extremely irritating to eyes and may cause severe damage including blindness.
Causes moderate skin irritation.

Chronic Health Hazards: Unknown

Signs and Symptoms of Overexposure

Eye Contact: Extremely irritating to eyes and may cause severe damage including blindness.

Skin Contact: Causes moderate skin irritation.

Ingestion: May be harmful if swallowed.

Inhalation: May be fatal if inhaled.

3. COMPOSITION/INFORMATION ON HAZARDOUS INGREDIENTS

Components:	Weight %
PETROLEUM SOLVENT (C8-C10) 64742-95-6	25
Carbamic acid, butyl-, 3-iodo- 2-propynyl ester (IPBC) 55406-53-6	40

4. FIRST AID MEASURES

Eye Contact:	In case of contact, or suspected contact, immediately flush eyes with plenty of water for at least 15 minutes and get medical attention immediately after flushing.
Skin Contact:	Immediately wash with soap and plenty of water. Remove contaminated clothing. Get medical attention if symptoms occur. Wash clothing before reuse.
Ingestion:	Do not induce vomiting. Slowly dilute with 1-2 glasses of water or milk and seek medical attention. Never give anything by mouth to an unconscious person.
Inhalation:	If inhaled, remove to fresh air. If not breathing or if breathing is difficult, give artificial respiration or oxygen by trained personnel. Seek medical attention.

5. FIRE FIGHTING MEASURES

NFPA Rating:	Health: 3 Flammability: 2 Reactivity: 0.
Flash Point (°F):	124
Extinguishing Media:	water fog, carbon dioxide, foam, dry chemical
Unusual Fire/Explosion Hazards:	Unknown
Special Protective Equipment:	Fire fighters should wear full protective clothing, including self-contained breathing equipment.
HMIS RATING:	
HEALTH	3
FLAMMABILITY	2
PHYSICAL HAZARD	0

6. ACCIDENTAL RELEASE MEASURES

Personal Precautionary Measures:	Use appropriate protective equipment.
Procedure for Cleaning/Absorption:	Remove ignition sources. Contain spill with sand or other inert materials.

7. HANDLING AND STORAGE

Handling:	Do not get in eyes. Avoid contact with skin and eyes. Avoid breathing vapors, if exposed to high vapor concentration, leave area at once. Wash thoroughly with soap and water after handling.
Storage:	Keep containers tightly closed when not in use. Store in a cool, dry place, out of direct sunlight. Avoid ignition sources.

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Engineering Controls:	Use in a well ventilated area.
Respiratory Protection:	Use in a well ventilated area. Wear a NIOSH approved respirator appropriate for airborne exposure at the point of use.
Hand Protection:	All cleanable impervious glove types are acceptable.

Eye Protection: Chemical goggles; also wear a face shield if splashing hazard exists.

Exposure Limits

Components:	ACGIH Threshold Limit Values Data - Time Weighted Average (TWA):	OSHA Specifically Regulated Substances Data - Time Weighted Average (TWA):
PETROLEUM SOLVENT (C8-C10) 64742-95-6	No TLV/TWA Established	No TLV/TWA Established
Carbamic acid, butyl-, 3-iodo-2-propynyl ester (IPBC) 55406-53-6	No TLV/TWA Established	No TLV/TWA Established

9. PHYSICAL AND CHEMICAL PROPERTIES

Physical State:	Liquid
Color:	Amber
Odor:	Characteristic
Odor Threshold:	Not available
pH:	7.0 (aqueous solution)
Specific Gravity:	1.15
Boiling Point (°F):	320
Melting Point/Freezing Point(°F):	NA
Vapor Pressure:	0.65 torr @ 68° F
Solubility:	Slightly soluble in Water / Miscible with solvents

10. STABILITY AND REACTIVITY

Chemical Stability:	Stable under normal conditions of handling, use and transportation.
Hazardous Polymerization:	Will not occur
Conditions to Avoid:	None anticipated
Materials to Avoid:	Strong acids and bases. Oxidizing materials. Corrodes metal packaging containers.

11. TOXICOLOGICAL INFORMATION

Toxicity Test:	
Acute Oral LD50 (mg/kg):	1984 (rat)
Acute Dermal LD50 (mg/kg):	1255 (rat)
Acute Inhalation LC50 (mg/l):	0.911 (4H) (rat)
Sensitization:	Negative in the Buehler assay in guinea pigs at challenge concentrations.
Mutagenicity:	Non-mutagenic (Bacterial Reverse Mutation Assay, Chromosomal Aberration Study, Unscheduled DNA Synthesis) (IPBC)
Carcinogenicity:	Not carcinogenic in rats after daily administration for 2 years via the diet (up to 80 mg/kg/day) (IPBC)
Teratogenicity:	Does not cause reproductive or developmental toxicity or teratogenicity when administered orally to mice or rats. (IPBC)
Skin Irritation:	Moderately irritating to rabbit skin (Tall Oil Fatty Acid Amide)

Eye Irritation: Severely irritating to rabbit eye.

Other Information: 4-Week Feeding Study: administered to rats via the diet at 60, 125 or 250 mg/kg/day for 4 weeks resulted in treatment-related effects at all doses. A NOEL was not established. (IPBC)
 13-Week Oral Toxicity: given to rats by gavage for 5 days/week for 13 weeks at 20, 50 or 125 mg/kg/day with a NOEL of 20 mg/kg/day. (IPBC)

The concentration and particle size distribution used to generate the above acute inhalation toxicity data were produced using methods and means that are highly unlikely to be generated during transport and are therefore not considered reasonably foreseeable.

12. ECOLOGICAL INFORMATION

Biodegradability: Not determined.

Aquatic Toxicity: Rainbow Trout: 24, 48, 72 and 96 hour LC50's in rainbow trout were >0.12, 0.097, 0.083 and 0.067 ppm respectively
 Bluegill: 24, 48, 72 and 96 hour LC50's in Bluegill were >0.32, 0.23, 0.23 and 0.23ppm respectively
 Daphnia magna: 48 hour LC50 in Daphnia magna was determined to be 0.645 ppm in a 48-hour static test without renewal of test media. In a chronic study, the 7-day, 14-day, and 21-day EC50's were 0.142, 0.136 and 0.133ppm respectively
 Bioconcentration: low potential for concentration in aquatic biota
 Avian Toxicity: was not toxic when ingested by quail or mallard ducks (IPBC)

13. DISPOSAL CONSIDERATIONS

Disposal of Waste Method: Federal, state and local disposal laws and regulations will determine the proper waste disposal/recycling/reclamation procedure. Disposal requirements are dependent on the hazard classification and will vary by location and the type of disposal selected.

Components:	Carbamic acid, butyl-, 3-iodo-2-propynyl ester (IPBC) 55406-53-6
RCRA Class-	Listed.

14. TRANSPORT INFORMATION

Land Transportation:

DOT (Non-Bulk):

UN/NA Number: UN1993

DOT Shipping Name: FLAMMABLE LIQUID N.O.S.(PETROLEUM SOLVENT)

Hazard Class: 3

Packing Group: III

DOT Marine Pollutant: This product has been determined to be a marine pollutant.

DOT (Bulk):

UN/NA Number: UN1993

DOT Shipping Name: FLAMMABLE LIQUID N.O.S.(PETROLEUM SOLVENT)

Hazard Class: 3

Packing Group: III

DOT Marine Pollutant: This product has been determined to be a marine pollutant.

Air Transportation (IATA):

UN Number: 1993

Proper Shipping Name: FLAMMABLE LIQUID N.O.S.(PETROLEUM SOLVENT)

Hazard Classification: 3

Packing Group: III

Sea Transportation (IMO):

UN/ID Number: 1993

Proper Shipping Name: FLAMMABLE LIQUID N.O.S.(PETROLEUM SOLVENT)

Hazard Classification: 3

Packing Group: III

Marine Pollutant: This product has been determined to be a marine pollutant.

TDG (Canada):

UN Number: 1993

Proper Shipping Name: FLAMMABLE LIQUID N.O.S.(PETROLEUM SOLVENT)

Hazard Class: 3

Packing Group: III

TDG Marine Pollutant: This product has been determined to be a marine pollutant.

15. REGULATORY INFORMATION

TSCA Inventory List: This product and/or its components is listed on TSCA.

California Proposition 65 Carcinogens & Reproductive Toxicity (CRT) List: None of the components of this product is listed on CALPROP.

WHMIS Ingredient Disclosure List: None of the components of this product is listed on WHMIS Ingredient Disclosure list.

Canada DSL Inventory List: This product and/or its components is listed on DSL.

Canada NDSL Inventory List: This product and/or its components is not listed on NDSL.

Japan Inventory of Existing & New Chemical Substances (ENCS): This product and/or its components is not listed on ENCS.

Australia Inventory of Chemical Substances (AICS) List: This product and/or its components is listed on AICS.

EU EINECS List: This product and/or its components is listed on EINECS.

ELINCS: This product and/or its components is not listed on ELINCS.

Components:	EPCRA (SARA Title III) Section 313 Toxic Chemical Data - De minimis concentration:	EPCRA (SARA Title III) Section 302 Extremely Hazardous Substance -	EPCRA (SARA Title III) Section 302 Extremely Hazardous Spill Data - Reportable quantity:	EPCRA (SARA Title III) Section 302 Extremely Hazardous Substance Data - Threshold Planning Quantity:	EPCRA (SARA Title III) Section 313 Toxic Chemical -
Carbamic acid, butyl-, 3-iodo-2-propynyl ester (IPBC) 55406-53-6	1.0 %				Listed.

16. OTHER INFORMATION

Prepared By: Product Stewardship

Legend: N.Av.= Not Available; N.A.= Not Applicable

Important Note: For purposes of this MSDS, International Specialty Products, as responsible party, provides the information herein which is intended for use by persons who have or should obtain professional knowledge and experience in the subjects discussed. ISP's industrial products are used as materials in the production of products by industrial customers. ISP usually has only limited information about the products of its customers and their composition, methods of manufacture and use. Accordingly, ISP MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO THE ACCURACY, COMPLETENESS OR RELIABILITY OF INFORMATION HEREIN EXCEPT THAT SUCH INFORMATION IS, TO THE BEST OF ISP'S KNOWLEDGE AND BELIEF, ACCURATE AS OF THE DATE INDICATED. ISP recommends that customers independently test and evaluate its products and their products and processes in which ISP products are used in order to decide their safety and effectiveness.

END OF MSDS



Material Safety Data Sheet

21130C

Revision Date: 10/27/2009

Issuing Date: 10/27/2009

Fungitrol® 940 Fungicide

1. IDENTIFICATION OF THE SUBSTANCE/PREPARATION AND OF THE COMPANY/UNDERTAKING

Company/Undertaking Identification: International Specialty Products
1361 Alps Rd.
Wayne, N.J. 07470
U.S.A.
Telephone: (973) 628-4000

Emergency Telephone: CHEMTREC: 1-800-424-9300 or 703-527-3887 (Outside of the USA)
(Spill Related Emergencies)
PROSAR: 1-800-241-7439 (Health Related Emergencies)

Prepared By: Product Stewardship

Product Code: 21130C

Product Name: Fungitrol® 940 Fungicide

Product Use Description: Biocide
FOR SAMPLING PURPOSES ONLY.

2. HAZARDS IDENTIFICATION

Emergency Overview
WARNING!
TOXIC BY INHALATION.
SEVERE EYE IRRITANT
MODERATE SKIN IRRITANT
Off-white
Dispersion

Hazard Summary

Target Organs:

- Eyes
- Skin
- Respiratory System
- Liver
- Gastrointestinal Tract

Primary Routes of Entry: Eyes. Skin. Inhalation.

Acute Health Hazard: Toxic by inhalation.
Severe eye irritant.
Moderate skin irritant.

Chronic Health Hazard: Unknown

Symptoms of Overexposure

Eye Contact: Severe eye irritant.

Skin contact: Moderate skin irritant.

Ingestion: Harmful if swallowed.

Inhalation: Toxic by inhalation.

3. COMPOSITION/INFORMATION ON INGREDIENTS

Components:	Weight %
Carbamic acid, butyl-, 3-iodo-2-propynyl ester 55406-53-6	40
Titanium dioxide 13463-67-7	1-10

4. FIRST AID MEASURES

Eye Contact:	In case of contact, immediately flush eyes with plenty of water for at least 15 minutes. Get medical attention immediately.
Skin Contact:	Wash off immediately with soap and plenty of water. Remove contaminated clothing and shoes. Get medical attention if symptoms occur. Wash clothing before reuse.
Ingestion:	Do not induce vomiting. If conscious, give 2 glasses of water. Get immediate medical attention.
Inhalation:	If inhaled, remove to fresh air. If breathing is irregular or stopped, administer artificial respiration. Get medical attention.

5. FIRE FIGHTING MEASURES

Suitable Extinguishing Media: water fog, carbon dioxide, foam, dry chemical

Combustion/Explosion Hazards: None Known

Special Protective Equipment For Fire-Fighters: Wear self-contained breathing apparatus and protective suit.

6. ACCIDENTAL RELEASE MEASURES

Personal Precautions: Wear suitable protective equipment.

Environmental Precautions: The product should not be allowed to enter drains, water courses or the soil.

Methods for Cleaning Up: Soak up with inert absorbent material. Keep in suitable, closed containers for disposal.

7. HANDLING AND STORAGE

Handling: Warning! Exercise care in handling and using this product. Avoid contact with skin and eyes. Avoid breathing vapors, mist or gas. Move to fresh air in case of accidental inhalation of vapors. Wash thoroughly after handling.

Storage: Keep container tightly closed. Keep in a dry, cool place. Keep away from direct sunlight. Avoid freezing conditions.

8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Engineering Measures: Use only in well-ventilated areas.

Respiratory Protection: Use only in well-ventilated areas. Use NIOSH approved respiratory protection.

Hand Protection: Impervious gloves

Eye Protection: Chemical resistant goggles must be worn. Face-shield

Exposure Limits:

Components:	ACGIH - Threshold Limit Values - Time Weighted Averages (TLV-TWA)	U.S. - OSHA - Final PELs - Time Weighted Averages (TWAs)
Carbamic acid, butyl-, 3-iodo-2-propynyl ester 55406-53-6 (40)	No TLV/TWA Established	No TLV/TWA Established
Titanium dioxide 13463-67-7 (1-10)	10 mg/m ³	15 mg/m ³ total dust

9. PHYSICAL AND CHEMICAL PROPERTIES

Physical State:	Dispersion
Color:	Off White
Odor:	Not determined
Odor Threshold:	Not available
pH:	5.3-7.3 (10% solution)
Specific Gravity:	1.20-1.26 (water=1)
Bulk Density:	10-10.5 (lbs/gal)
Boiling Point (°F):	212 (100°C)
Melting/Freezing Point (°F):	<32 (<0°C)
Vapor Pressure:	Not determined
Solubility:	Miscible in Water
Flash Point (°F):	Not determined

10. STABILITY AND REACTIVITY

Chemical Stability:	Stable under normal conditions.
Conditions to Avoid:	Avoid temperatures above 50 °C
Hazardous decomposition products:	Carbon monoxide, Carbon dioxide (CO ₂), Iodine vapors.

11. TOXICOLOGICAL INFORMATION

Toxicity Test:

Acute Oral Toxicity:	1984 mg/kg (Rat) (based on similar product)
Acute Dermal Toxicity:	1225 mg/kg (Rat) (based on similar product)
Acute Inhalation Toxicity:	0.911 mg/l (4 hour) (Rat) (based on similar product)
Eye Irritation:	Severe eye irritation (Rabbit) (based on similar product)
Skin Irritation:	Moderately irritating to rabbit skin. (based on similar product)
Sensitization:	Non- sensitizing to guinea pig skin. (Buehler) (based on a similar product)
Mutagenicity:	Negative in Ames Test. (IPBC)
Teratogenicity:	Does not cause embryotoxicity or teratogenicity when administered orally to rats at doses up to 125 mg/kg/day from day 6-15 gestation (highest dose tested, IPBC).
Carcinogenicity:	Not carcinogenic when administered in the diet of rats for 104 weeks. (IPBC)

This material contains titanium dioxide, a component that has been tested in several carcinogenicity studies. Lung tumors were observed in rats following high dose exposure by inhalation and in female rats exposed by intratracheal instillation. Other studies have shown no tumors in rats following inhalation exposure and no tumors in mice or rats following oral exposure.

Components:	IARC Monographs on Occupational Exposures to Chemical Agents List -	NTP Report on Carcinogens List -	U.S. - OSHA - Carcinogens
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Components:	IARC Monographs on Occupational Exposures to Chemical Agents List -	NTP Report on Carcinogens List -	U.S. - OSHA - Carcinogens
Titanium dioxide 13463-67-7 (1-10)	Group 2B (Possibly Carcinogenic to Humans)		Listed

Other Information:

13-Week Oral Toxicity: given to rats by gavage for 5 days/week for 13 weeks at 20, 50 or 125 mg/kg/day with a NOEL of 20 mg/kg/day. Adverse effects included liver cytomegaly and stomach irritation. (IPBC)

The concentration and particle size distribution used to generate the above acute inhalation toxicity data were produced using methods and means that are highly unlikely to be generated during transport and are therefore not considered reasonably foreseeable.

12. ECOLOGICAL INFORMATION

Persistence and Degradability: Not readily biodegradable. (IPBC)

Ecotoxicity: LC50=0.067 ppm 96hour (Rainbow Trout) (IPBC)
LC50=0.27 ppm 96hour (Bluegill Sunfish) (IPBC)
EC50=0.645 ppm 48hour (Daphnia Magna) (IPBC)

13. DISPOSAL CONSIDERATIONS

Waste Disposal Methods: Dispose of in accordance with local regulations.

Components:	RCRA Class-
Carbamic acid, butyl-, 3-iodo-2-propynyl ester 55406-53-6 (40)	Listed

14. TRANSPORT INFORMATION

Land Transport:

DOT (Non-Bulk):

UN/NA Number: UN3082

Proper Shipping Name: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S.(3-Iodo-2-propynyl butyl carbamate)

Hazard Class: 9

Packing Group: III

DOT Marine Pollutant: Marine pollutant

DOT (Bulk):

UN/NA Number: UN3082

Proper Shipping Name: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S.(3-Iodo-2-propynyl butyl carbamate)

Hazard Class: 9

Packing Group: III

DOT Marine Pollutant: Marine pollutant

Air Transport (IATA):

UN Number: 3082

Proper Shipping Name: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S.(3-Iodo-2-propynyl butyl carbamate)

Hazard Class: 9

Packing Group: III

Sea Transport (IMO):

UN/ID Number: 3082

Proper Shipping Name: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S.(3-Iodo-2-propynyl butyl carbamate)

Hazard Class: 9

Packing Group: III

Marine Pollutant: Marine pollutant

TDG (Canada):

UN Number: 3082

Proper Shipping Name: ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S.(3-Iodo-2-propynyl butyl carbamate)

Hazard Class: 9

Packing Group: III

TDG Marine Pollutant: Marine pollutant

15. REGULATORY INFORMATION

Inventories	Status
TSCA	Listed
DSL	Listed
NDSL	Not Listed
ENCS	Not Listed
AICS	Not Listed
EINECS	Not Listed
ELINCS	Not Listed
NZIoC	Not Listed
KECI	Not Listed
PICCS	Not Listed
IECSC	Not Listed

**California Proposition 65
Carcinogens & Reproductive
Toxicity (CRT) List:**

This product does not contain any chemicals known to State of California to cause cancer, birth, or any other reproductive defects.

EPCRA (SARA Title III):

Components:	EPCRA (SARA Title III) Section 313 Toxic Chemical Data - De minimis concentration:	EPCRA (SARA Title III) Section 302 Hazardous Substances	EPCRA (SARA Title III) Section 302 Extremely Hazardous Substance
Carbamic acid, butyl-, 3-iodo-2-propynyl ester 55406-53-6 (40)	1.0 %		

WHMIS Ingredient Disclosure List: None of the components of this product is listed on WHMIS Ingredient Disclosure list.

WHMIS:

This product has been classified in accordance with the hazard criteria required by the Controlled Products Regulations and the MSDS contains all the information required by the Controlled Products Regulations.

WHMIS Hazard Class:

D1B TOXIC MATERIALS
D2A VERY TOXIC MATERIALS
D2B TOXIC MATERIALS

**16. OTHER INFORMATION****NFPA Rating:**

Health: 3 Flammability: 1 Reactivity: 0.

HMIS RATING:**HEALTH**

3*

FLAMMABILITY

1

PHYSICAL HAZARD

0

Prepared By:

Product Stewardship

MSDS sections updated:

None

Legend:

N.Av.= Not Available; N.A.= Not Applicable

Disclaimer:

For purposes of this MSDS, International Specialty Products, as responsible party, provides the information herein which is intended for use by persons who have or should obtain professional knowledge and experience in the subjects discussed. ISP's industrial products are used as materials in the production of products by industrial customers. ISP usually has only limited information about the products of its customers and their composition, methods of manufacture and use. Accordingly, ISP MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO THE ACCURACY, COMPLETENESS OR RELIABILITY OF INFORMATION HEREIN EXCEPT THAT SUCH INFORMATION IS, TO THE BEST OF ISP'S KNOWLEDGE AND BELIEF, ACCURATE AS OF THE DATE INDICATED. ISP recommends that customers independently test and evaluate its products and their products and processes in which ISP products are used in order to decide their safety and effectiveness.

*****End of Safety Data Sheet*****

SAFETY DATA SHEET (SDS)

TROY CORPORATION 8 Vreeland Road Florham Park, NJ 07932	FOR SDS INFORMATION: (973) 589-2500 24 HOUR EMERGENCY PHONE NUMBER CHEMTREC 1-800-424-9300	Mergal® 192 Product Code: 30207 Effective Date: May 2, 2014 Replaces: January 20, 2011												
1. PRODUCT & COMPANY IDENTIFICATION														
PRODUCT NAME CHEMICAL NAME CHEMICAL FAMILY FORMULA SYNONYMS	Mergal® 192 4,4-dimethyloxazolidine Amine C5 H11 O N None	MANUFACTURER Troy Chemical Corporation 1 Avenue L Newark, N.J. 07105												
2. HAZARDS IDENTIFICATION														
EMERGENCY OVERVIEW														
Mergal® 192 is a white to pale yellow clear liquid with an amine odor. Highly alkaline, pH=11. Combustible liquid. May cause severe eye irritation with irreversible corneal damage as well as respiratory irritation. Signal word - DANGER. Excessive heat will result in decomposition to ammonia and, at temperatures in excess of 140°C (284°F), to formaldehyde. This material is toxic to fish and wildlife.														
OSHA REGULATORY STATUS														
This material is classified as hazardous under OSHA regulations														
POTENTIAL HEALTH EFFECTS														
ROUTES OF ENTRY Ingestion, skin contact, eyes, inhalation														
ACUTE EFFECTS														
INGESTION Ingestion may cause gastrointestinal irritation, nausea, and vomiting.														
SKIN May cause slight skin irritation. This product is not a skin sensitizer.														
EYE CONTACT May cause severe eye irritation and irreversible corneal damage if not washed from eyes promptly.														
INHALATION May cause respiratory irritation.														
CHRONIC EFFECTS There are no known chronic effects.														
TARGET ORGANS None														
CARCINOGENICITY This product (or component) is not listed as a carcinogen according to OSHA, NTP, IARC, and ACGIH.														
MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE														
There are no known conditions aggravated by exposure to this product.														
POTENTIAL ENVIRONMENTAL EFFECTS														
This material is toxic to fish and wildlife.														
See Section 12 for additional information.														
3. COMPOSITION/INFORMATION ON INGREDIENTS														
The listed components are considered to be hazardous based on OSHA's Hazard Communication Standard. For further regulatory information, see Section 15.														
<table> <tr> <th>CHEMICAL NAME</th><th>CAS#</th><th>%</th></tr> <tr> <td>4,4-dimethyloxazolidine</td><td>51200-87-4</td><td>73.7</td></tr> <tr> <td>3,4,4-trimethyloxazolidine</td><td>75673-43-7</td><td>1-3</td></tr> <tr> <td>2-amino-2-methyl-1-propanol</td><td>124-68-5</td><td>0.2-2</td></tr> </table>	CHEMICAL NAME	CAS#	%	4,4-dimethyloxazolidine	51200-87-4	73.7	3,4,4-trimethyloxazolidine	75673-43-7	1-3	2-amino-2-methyl-1-propanol	124-68-5	0.2-2		
CHEMICAL NAME	CAS#	%												
4,4-dimethyloxazolidine	51200-87-4	73.7												
3,4,4-trimethyloxazolidine	75673-43-7	1-3												
2-amino-2-methyl-1-propanol	124-68-5	0.2-2												
4. FIRST AID MEASURES														
INGESTION Immediately call a poison control center or doctor. Do not induce vomiting unless told to do so by a poison control center or doctor. Do not give any liquid to the person. Do not give anything by mouth to an unconscious person.														
SKIN CONTACT Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. Call a poison control center or doctor for treatment advice.														
EYE CONTACT Hold eye open and rinse slowly and gently with water for 15-20 minutes. Remove contact lenses, if present, after 5 minutes, then continue rinsing. Call a poison control center or doctor for treatment advice.														
INHALATION Move person to fresh air. If person is not breathing, call 911 or an ambulance, then give artificial respiration, preferably mouth-to-mouth, if possible. Call a poison control center or doctor for further treatment advice.														
NOTES TO PHYSICIAN This product is highly alkaline, pH=10.8. Probable mucosal damage may contraindicate use of gastric lavage. Measures against circulatory shock, respiratory depression, and convulsion may be needed.														
Have the product container or label with you when calling a poison control center or doctor, or going for treatment.														
5. FIRE FIGHTING MEASURES														
FLAMMABLE PROPERTIES														
Combustible liquid - Class II														
FIRE EXTINGUISHING MEDIA Suitable extinguishing media - Dry chemical, carbon dioxide, water spray, or alcohol-resistant foam.														
Unsuitable extinguishing media - Water jet														
PROTECTION OF FIREFIGHTERS														
Specific hazards arising from the chemical:														
Thermal decomposition may release the following hazardous substances														
Carbon monoxide, carbon dioxide, ammonia and formaldehyde.														
Solvent vapors are heavier than air and may travel along the ground or be moved by ventilation and ignited by flames and ignition sources. Contact may cause burns to skin and eyes. Runoff to sewer may create fire or explosion hazard. Runoff from fire control or dilution water may cause pollution. Never use welding or cutting torch on or near drum (even empty) because product (even residue) can ignite explosively. Excessive heat in excess of 140°C (284°F) will result in decomposition to ammonia and formaldehyde.														
Protective equipment and precautions for firefighters:														
Move container from fire area if you can do it without risk. Apply cooling water to sides of containers that are exposed to flames until well after fire is out. Avoid breathing vapors, keep upwind. Positive pressure self-contained breathing apparatus with full facepiece and structural firefighters' protective clothing will provide limited protection.														

SAFETY DATA SHEET (SDS)

TROY CORPORATION 8 Vreeland Road Florham Park, NJ 07932		FOR SDS INFORMATION: (973) 589-2500 24 HOUR EMERGENCY PHONE NUMBER CHEMTREC 1-800-424-9300		Mergal® 192 Product Code: 30207 Effective Date: May 2, 2014 Replaces: January 20, 2011	
6. ACCIDENTAL RELEASE MEASURES					
Keep unnecessary people away; isolate hazard area and deny entry. Stay upwind; keep out of low areas. Wear protective equipment as specified in Section 8. Positive pressure self-contained breathing apparatus and structural firefighters' protective clothing will provide limited protection. Shut off ignition sources; no flares, smoking, or flames in hazard area. Do not touch or walk through spilled material. Stop leak if you can do it without risk. For small spills, absorb with vermiculite or other noncombustible absorbent material and place into containers for later disposal. For large spills, dike far ahead of liquid spill for later disposal. If water pollution occurs, notify the appropriate authorities. Observe all Federal, State, and Local regulations regarding notifications of accidental releases.					
7. HANDLING & STORAGE					
Avoid contact with skin, eyes, or clothing. Avoid breathing vapor or mist. Wash thoroughly after handling. Keep container tightly closed. Use only with adequate ventilation. "Empty" containers retain product residue (liquid and/or vapor) and can be dangerous. DO NOT PRESSURIZE, CUT, WELD, BRAZE, SOLDER, DRILL, GRIND, OR EXPOSE SUCH CONTAINERS TO HEAT, FLAME, SPARKS, STATIC ELECTRICITY, OR OTHER SOURCES OF IGNITION. THEY EXPLODE AND CAUSE INJURY OR DEATH. Empty drums should be completely drained, properly bunged and promptly returned to a drum reconditioner, or properly disposed of. Store away from incompatible substances in a cool, dry, ventilated area. Do not store at freezing temperatures or above 60°C (140°F) for extended periods. Avoid contact with brass, copper, or aluminum - will cause discoloration. Store in accordance with 29CFR1910.106. Substances with low electroconductivity, which may be ignited by electrostatic sparks, should be stored in containers which meet the bonding and grounding guidelines in NFPA77, Recommended Practice on Static Electricity. Do not contaminate water, food, or feed by storage or disposal. Plastic drums are non-conductive and, appropriate safety measures must be taken to prevent possible ignition when filling or dispensing flammable or combustible liquids. Storage and dispensing operations must comply with appropriate regulations (such as NFPA). Observe all Federal, State, and Local regulations when storing or disposing of this substance.					
8. PERSONAL PROTECTION/EXPOSURE CONTROLS					
EXPOSURE GUIDELINES		None established			
VENTILATION		Provide adequate ventilation or local exhaust to minimize exposure.			
EYE/FACE PROTECTION		If potential for contact with liquid exists, use splash-proof safety goggles and a faceshield.			
SKIN PROTECTION		Direct contact may cause slight skin irritation. Wear impervious gloves and apron to prevent skin contact.			
RESPIRATORY PROTECTION		Whenever workplace conditions warrant the use of a respirator, a respiratory protection program meeting OSHA 1910.134 must be followed utilizing a NIOSH/MSHA-approved respirator.			
OTHER		Eyewash and safety shower should be available within the immediate work area for emergency use.			
9. PHYSICAL AND CHEMICAL PROPERTIES					
APPEARANCE		White to pale yellow clear liquid	SPECIFIC GRAVITY AT 25°C. (Water=1)		0.96-0.99
ODOR		Amine odor	WATER SOLUBILITY		100%
pH		10.7-11.7	AUTOIGNITION TEMPERATURE		Not determined
MELTING/FREEZING POINT		Not determined	DECOMPOSITION TEMPERATURE		Not determined
INITIAL BOILING POINT		101°C (214°F)	VISCOSITY (Gardner) AT 25°C.		A - A5
FLASH POINT (ASTM D3278-96)			% VOLATILES BY WEIGHT		100%
(Setaflash Closed cup)		43°C (110°F)	VAPOR PRESSURE AT 20°C.		22.9 mm Hg
EVAPORATION RATE (Butyl acetate=1)		>1	VAPOR DENSITY (Air=1)		>1
FLAMMABLE LIMITS		Not determined			
10. STABILITY & REACTIVITY					
REACTIVITY		Stable under normal temperatures and pressures.			
CONDITIONS TO AVOID		Avoid heat or sources of ignition.			
INCOMPATIBILITY		Avoid contact with strong acids, bases, and oxidizers.			
HAZARDOUS DECOMPOSITION		Decomposition may release carbon monoxide, carbon dioxide, ammonia, and formaldehyde.			
HAZARDOUS POLYMERIZATION		Hazardous polymerization does not occur.			
11. TOXICOLOGICAL INFORMATION					
Toxicological data is included on the active ingredient. For additional information, contact Troy Corporation:					
ACUTE ORAL EFFECTS					
LD50 (oral, rat-female) - 1037 mg/kg.; LD50 (oral, rat-male) - 1308 mg/kg.					
ACUTE SKIN EFFECTS					
LD50 (dermal, rat) >2000 mg/kg. Slight irritation (rabbit).					
This product is not considered to be a skin sensitizer according to results from the Buehler Sensitization Assay.					
ACUTE EYE EFFECTS					
Severe irritation and corrosive (rabbit). Corneal damage may be irreversible if not washed from eyes promptly.					
ACUTE INHALATION EFFECTS					
LC50 (rat,4 hr) - 1.1 mg/L.					
SUBCHRONIC EFFECTS AND OTHER STUDIES					
Subchronic dermal toxicity: In animal studies, no significant adverse effects were found.					
Developmental toxicity: In animal studies, developmental toxicity was not demonstrated in any of the test results.					
Mutagenicity: 4,4-dimethyloxazolidine was negative in most mutagenicity tests.					
For additional information on active ingredients, contact Troy Corporation.					
12. ECOLOGICAL INFORMATION					
Ecotoxicological data is included on the active ingredient. For additional information, contact Troy Corporation:					
ECOTOXICITY					
The active ingredient 4,4-dimethyloxazolidine is toxic to fish and wildlife. Data is as follows:					
LC50 (rainbow trout, 96 hr flow-through) - 95 mg/L.					
LC50 (bluegill sunfish, 96 hr flow-through) - 59 mg/L. (based on 77.2% active)					
EC50 (daphnia magna, 48 hr) - 45 mg/L. (based on 77% active)					
LC50 (sheepshead minnow, 96 hr flow-through) - 218 mg/L. (based on 82% active)					
LC50 (pink shrimp, 96 hr flow-through) - 230 mg/L. (based on 77% active)					
LC50 (eastern oyster, 96 hr flow-through) - 9.2 mg/L. (based on 82.5% active)					

SAFETY DATA SHEET (SDS)

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ENVIRONMENTAL FATE The active ingredient 4,4-dimethyloxazolidine rapidly degrades in water. Octanol/water partition coefficient: LogP _{ow} - 0.73		
13. DISPOSAL INFORMATION		
RCRA HAZARDOUS WASTE This product is a RCRA hazardous waste based on its flash point (<60°C) therefore meeting the characteristic of ignitability.		
WASTE DISPOSAL PROCEDURE The user of this material has the responsibility to dispose of unused material, residues, and containers in compliance with all Federal, State, and Local Regulations		
14. TRANSPORTATION INFORMATION		
DOT	SHIPPING NAME	UN1993, Flammable liquids, n.o.s. (contains: 4,4-dimethyloxazolidine), 3, PG III, ERG# 128
	LABELS REQUIRED	Flammable liquid
IATA	SHIPPING NAME	UN1993, Flammable liquids, n.o.s. (contains: 4,4-dimethyloxazolidine), 3, PG III, ERG# 3L
	LABELS REQUIRED	Flammable liquid
IMDG	SHIPPING NAME	UN1993, Flammable liquids, n.o.s. (contains: 4,4-dimethyloxazolidine), 3, PG III, FP 43°C (110°F), EMS# F-E, S-E
	LABELS REQUIRED	Flammable liquid
15. REGULATORY INFORMATION		
CERCLA SECTION 103 (40CFR302.4) This product does not contain any chemicals that are reportable to the National Response Center under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA).		
SARA SECTION 302 (40CFR355.30), SARA SECTION 304 (40CFR355.40) This product does not contain any chemicals that require emergency planning based on Threshold Planning Quantities (TPQ) or release reporting based on Reportable Quantities (RQ).		
SARA HAZARD CATEGORIES, SARA SECTIONS 311/312 (40CFR370.21)		
ACUTE <input checked="" type="checkbox"/>	CHRONIC <input type="checkbox"/>	FIRE <input checked="" type="checkbox"/>
		REACTIVE <input type="checkbox"/>
		PRESSURE <input type="checkbox"/>
SARA SECTION 313 (40CFR372.65) This product does not contain any chemicals subject to the reporting requirements of the Emergency Planning and Community Right-to-Know Act of 1986.		
CHEMICAL INVENTORIES The ingredients of this product are all on the following Chemical Substance Inventories, are exempt from the Inventories, or are otherwise compliant with inventory requirements of the governing agency.		
TSCA <input checked="" type="checkbox"/> U.S.	EINECS <input checked="" type="checkbox"/> Europe	DSL <input checked="" type="checkbox"/> Canada
		AICS <input checked="" type="checkbox"/> Australia
		ECL <input checked="" type="checkbox"/> Korea
		MITI, ENCS <input checked="" type="checkbox"/> Japan
		PICCS <input checked="" type="checkbox"/> Philippines
IECSC <input checked="" type="checkbox"/> China	NZIoC <input checked="" type="checkbox"/> New Zealand	NECI <input checked="" type="checkbox"/> Taiwan
CALIFORNIA PROPOSITION 65 This product does not contain any substances that are currently on the list of Known Carcinogens and Reproductive Toxins, at levels which would require a warning under the statute.		
STATE RIGHT-TO-KNOW This product is regulated by the Federal Insecticide, Fungicide, and Rodenticide Act (FIFRA) and is exempt from State Right-to-Know labeling requirements when labeled with an approved EPA label. EPA Registration No. 5383-82		
16. OTHER		
REVISIONS Prepared by: Environmental and Regulatory Affairs Dept. This SDS has been revised in the following sections: (revisions indicated in left border) Address, Product Code, Sect. 3 (Composition), Sect. 15 (Chemical Inventories)		
ABBREVIATIONS		
PNO - Particulates not otherwise classified STEL - Short-term exposure limit		PNOR - Particulates not otherwise regulated TWA - Time-weighted average
TLV - Threshold limit value		
HMIS RATING		
HEALTH 3	FLAMMABILITY 2	REACTIVITY 0
PERSONAL PROTECTION H		
NFPA RATING		
HEALTH 3	FLAMMABILITY 2	REACTIVITY 0
The information contained in this SDS is believed to be accurate and reliable as of issue date, but no representation, guarantee, or warranty, express or implied is made to the accuracy, reliability, or completeness of the information. It is provided for the purpose of complying with hazard communication regulations. It is not intended as performance information or specifications for the product. It is the user's responsibility to determine the suitability of the product for his own use. Troy does not assume legal responsibility for reliance on information herein. Grotan® Mergal® Polyphase® Powdermate® Troykyd® Troysan® Troyshield® Troythix® TroyCare™ Troychem™ TroyGuard™ Troymax™ Troysol™ Troysperse™ are trademarks of Troy.		
LAST PAGE		

IN CASE OF TRANSPORTATION EMERGENCY CONTACT:

CHEMTREC:(800) 424-9300

ALL OTHER INQUIRIES:
(770) 904-7042 // www.ciscochem.com
266 Rue Cezzan Lavonia, GA 30553



1. IDENTIFICATION

CAS # 8052-41-3

SYNONYMS:

Naphtha, stoddard solvent, mineral spirits, white spirit

GENERIC CHEMICAL NAME:

Naphtha, high paraffinic, stoddard solvent, naphtha solvent

PRODUCT TYPE:

Substance

2. HAZARDS IDENTIFICATION

APPEARANCE:

COLORLESS LIQUID

ODOR:

PETROLEUM SOLVENT

SIGNAL WORD:

WARNING!
FLAMMABLE LIQUID AND VAPOR
STATIC ACCUMULATING LIQUID CAN BECOME ELECTROSTATIC ALLY
IN BONDED AND GROUNDED EQUIPMENT; SPARKS MAY IGNITE LIQUID
AND VAPOR MAY CAUSE FLASH FIRE
HARMFUL IF SWALLOWED, CAN ENTER LUNGS AND CAUSE DAMAGE
MAY CAUSE CHRONIC EFFECTS
MAY CAUSE SKIN IRRITATION
MAY CAUSE EYE IRRITATION
MAY CAUSE RESPIRATORY TRACT IRRITATION
PROLONGED SKIN CONTACT MAY CAUSE IRRITATION

EXPOSURE ROUTES:

INHALATION, INGESTION, SKIN AND/OR EYE CONTACT

PHYSICAL:

KEEP AWAY FROM HEAT, SPARKS AND FLAME. KEEP CONTAINER
TIGHTLY CLOSED. USE ONLY WITH ADEQUATE VENTILATION.
AVOID SPARK PROMOTERS. GROUND/BOND CONTAINER AND
EQUIPMENT. THESE ALONE MAY BE INSUFFICIENT TO REMOVE
STATIC ELECTRICITY

EYES:

AVOID CONTACT WITH EYES. WASH THOROUGHLY AFTER HANDLING

SKIN: AVOID CONTACT WITH SKIN AND CLOTHING. WASH THOROUGHLY AFTER HANDLING

SYMPTOMS OF OVER EXPOSURE: IRRITATION TO EYES, NOSE, THROAT; DIZZINESS; DERMATITIS; CHEMICAL PNEOMONITIS (aspiration liquid)

MEDICAL CONDITIONS AGGRAVATED BY EXPOSURE: PRE-EXISTING DISORDERS INVOLVING ANY TARGET ORGANS MENTIONED IN THIS MSDS ARE BEING AT RISK MAY BE AGGRAVATED BY OVER EXPOSURE TO THIS PRODUCT.

CHRONIC EFFECTS:

3. COMPOSITION

CAS #	COMPONENT	PERCENT
8052-41-3	STODDARD SOLVENT	100

HAZARDOUS CONSTITUENT(S) CONTAINED IN COMPLEX SUBSTANCES

CAS #	COMPONENT	PERCENT
100-41-4	ETHYL BENZENE	0.1
111-84-2	NONANE	1.0-8.0
25551-13-7	TRIMETHYL BENZENE (mixed isomers)	0.5-5.0

Component Regulatory Information

This product may be regulated, have exposure limits or other information identified as the following: Stoddard solvent, Ethyl Benzene, Nonane, Trimethyl Benzene (See Section 8)

4. FIRST AID MEASURES

EYES

Check for and remove any contact lenses. Immediately flush eyes with plenty of water for at least 15 minutes, occasionally lifting the upper and lower eyelids. Get medical attention immediately.

SKIN

In case of contact, immediately flush skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Wash clothing before reuse. Clean shoes thoroughly before reuse. Get medical attention immediately.

INHALATION:

Move exposed person to fresh air. If not breathing, if breathing is irregular or if respiratory arrest occurs, provide artificial respiration or oxygen by trained personnel. Loosen tight clothing such as a collar, tie, belt or waistband. Get medical attention immediately.

INGESTION:

DO NOT INDUCE VOMITING. If conscious, rinse out mouth with water. Get medical attention immediately.

NOTE TO PHYSICIANS

No specific treatment. Treat symptomatically. Contact poison treatment specialist immediately if large quantities have been ingested or inhaled.

5. FIRE FIGHTING MEASURES

Flammable Properties

This product is a flammable static accumulating liquid. Static accumulating liquid can become electrostatically charged even in bonded and grounded equipment. Sparks may ignite liquid and vapor may cause flash fire. Static electricity accumulation may be significantly increased by the presence of small quantities of water or other contaminants. Restrict flow velocity to avoid build-up of static charge. Refer to NFPA 77, API 2003, and CENELEC CLC/TR 50404 for further guidance.

Extinguishing Media

Use dry chemical, CO₂, water spray (FOG) or foam

Specific Hazards Arising from Chemical

Elevated temperatures can lead to the formation of irritating fumes and vapors. Decomposition products may include the following materials: Carbon dioxide and Carbon monoxide.

Protective Equipment and Precautions for Firefighters

Fire-fighters should wear appropriate protective equipment and self-contained breathing apparatus (SCBA) with a full face-piece operated in positive pressure mode.

6. ACCIDENTAL RELEASE MEASURES

Personal Precautions

No action shall be taken involving any personal risk or without suitable training. Evacuate surrounding areas. Keep unnecessary and unprotected personnel from entering. Do not touch or walk through spilled material. Shut off all ignition sources. No flares, smoking or flames in hazard area. Avoid breathing vapor or mist. Provide adequate ventilation. Wear appropriate respirator when ventilation is inadequate. Put on appropriate personal protective equipment.

Environmental Precautions

Avoid dispersal of spilled material and runoff and contact with soil, waterways, drains and sewers. Inform the relevant authorities if the product has caused environmental pollution.

Methods for Containment

Stop leak if without risk.

Methods for Cleanup

Move containers from spill area. Approach release from upwind. Absorb with an inert dry material and place in an appropriate waste disposal container. Dispose of via a licensed waste disposal contractor.

7. HANDLING AND STORAGE

Handling Procedures

Eating, drinking, and smoking should be prohibited in areas where this material is handled, stored and processed. Workers should wash hands and face before eating, drinking and smoking. Remove contaminated clothing and protective equipment before entering eating areas. Do not get in eyes or on skin or clothing. Do not ingest. Avoid breathing vapor or mist. Use only with adequate ventilation. Use non-sparking tools.

Shipping and Storing Procedures

Store in accordance with local regulations. Store in a segregated and approved area. Keep in the original container protected from direct sunlight in a dry, cool and well-ventilated area, away from incompatible materials. Do not store in unlabeled containers. Store and use away from heat, sparks, open flame or any other ignition source. Take precautionary measures against electrostatic discharges. To avoid fire or explosion, dissipate static electricity during transfer by grounding and bonding containers and equipment before transferring material. Empty containers that retain product residue may be hazardous. Do not reuse container.

8. EXPOSURE CONTROLS AND PERSONAL PROTECTION

Component Exposure Limits

Stoddard Solvent

ACGIH TLV:	TWA:	100ppm		
OSHA PEL:	TWA:	500 ppm	TWA:	2900 mg/m ³

NIOSH REL:	TWA:	N/A ppm	TWA:	350 mg/m3
NIOSH Ceiling:	1800 mg/m3 [15 minute]			
Ethyl Benzene ACGIH TLV:	TWA:	20 ppm	TWA:	N/A mg/m3
OSHA PEL:	TWA:	100 ppm	TWA:	435 mg/m3
Nonane ACGIH TLV:	TWA:	200 ppm		
Trimethyl Benzene (all isomers) ACGIH TLV:	TWA:	25 ppm		

N/A signifies not available.

ENGINEERING CONTROLS

This product is a static accumulating liquid. Ground/bond container and equipment. These alone may be insufficient to remove static electricity. Material should be handled in enclosed vessels and equipment. Use only in adequate ventilation. Use process enclosures, local exhaust ventilation or other engineering controls to keep worker exposure to airborne contaminants below any recommended or statutory limits.

EYE/FACE PROTECTION

Chemical goggles or face shield

SKIN PROTECTION

Chemical resistant, impervious gloves complying with an approved standard should be worn at all times. Coveralls, apron, and boots as necessary to minimize contact.

RESPIRATORY PROTECTION

Use a properly fitted, air-purifying or air-fed respirator complying with an approved standard if a risk assessment indicated this is necessary. Respirator selection must be based on known or anticipated exposure levels.

GENERAL HYGIENE

Wash hands, forearms and face thoroughly after handling chemical products, before eating, smoking and using the lavatory and at the end of the working period. Appropriate techniques should be used to remove potentially contaminated clothing.

9. PHYSICAL AND CHEMICAL PROPERTIES

Note: Physical and chemical properties are provided for safety, health and environmental considerations only and may not fully represent product specifications. Please see the Product Specification Sheet for further information.

Appearance:	Colorless
Odor:	Petroleum solvent
Physical State:	Liquid
Flash Point (f):	105
Boiling Point (f):	>310
Vapor Pressure (mm Hg at 20°C):	0.62
Water Soluble:	NO

Specific Gravity (g/cc):	.77
Density (lbs/gal)	6.4
PH:	Not available

10. STABILITY AND REACTIVITY

Stability:	Stable under normal conditions. If heated, product's static accumulation will rise and could cause flash fire.
Polymerization:	No polymerization
Incompatibility:	Strong acids and oxidizing materials
Conditions to Avoid:	High temperatures, sparks, flames
Hazardous Decomposition Products:	Does not decompose at ambient temperatures

11. TOXICOLOGICAL INFORMATION

Acute Exposure
Minimally toxic. Negligible hazards at ambient/normal handling temperatures.

Respiratory Irritation
If material is misted or if vapors are generated from heating, exposure may cause irritation of mucous membranes and the upper respiratory tract. Based on data from components or similar materials.

Eye Irritation
May cause eye irritation. Vapors formed from heating may cause eye irritation.

Skin Irritation
May cause skin irritation

Sensitization
Not expected to cause skin or respiratory sensitization.

Component Analysis – LD50 / LC50
Acute Toxicity Estimate (ATE) Values for Product:

Inhalation LC50 Rat	21 mg/L 1 HR
Oral LD50 Rat	>7000 mg/kg
Dermal LD50 Rabbit	>2000 mg/kg

Chronic Exposure

Target Organ Effects
Vapor/aerosol concentrations above recommended exposure levels are irritating to the eyes and respiratory tract, may cause headaches, dizziness, anesthesia, drowsiness, unconsciousness and other central nervous system effects including death. Prolonged or repeated direct exposure to the skin results in symptoms of irritation and redness, dermatitis or oil acne.

Small amounts of liquid aspirated into the lungs during ingestion or from vomiting may cause chemical pneumonitis or pulmonary edema.

Carcinogenicity

Contains Ethyl Benzene which is considered a carcinogen under IARC. It has caused cancer in laboratory animal studies. The relevance of these findings to humans is uncertain.

Mutagenicity

No data available to indicate product or any components present at greater than .1% are mutagenic or genotoxic.

Reproductive Toxicity

No data available to indicate either product or components present at greater than .1% that may cause reproductive toxicity.

Teratogenicity

No data available to indicate product or any components contained at greater than .1% may cause birth defects.

12. ECOLOGICAL INFORMATION

Component Analysis- Ecotoxicity – Aquatic Life

Duration/Test/Species	Concentrations/Conditions
96 Hr LC50	N/A mg/L
Pimephals promelas	

Degradability Not determined

Bioaccumulation Not determined

Soil Mobility Not determined

13. DISPOSAL CONSIDERATIONS

Disposal Instructions

The generation of waste should be avoided or minimized wherever possible. Treatment, storage, transportation and disposal must be in accordance with applicable Federal, State/Provincial, and Local regulations.

14. TRANSPORT INFORMATION

EMERGENCY RESPONSE GUIDE NUMBER: 128

U.S. DOT BULK (OVER 119 GALLONS)

UN 1268, PETROLEUM DISTILLATES , N.O.S. (Naphtha solvent), 3, PG III, combustible liquid

Bulk container must be labeled on two opposing sides

U.S. DOT Non-bulk (under 119 gallons)

Not regulated.....Exempt from labeling and placarding unless shipped via Air or Vessel

*Truck/Rail car must be placarded on all 4 sides if aggregate gross weight exceeds 1,000 pounds

15. REGULATORY INFORMATION

SARA Extremely Hazardous

Substances (Sections 302 & 304)

This product does not contain greater than 1% of any "extremely hazardous substances" listed pursuant to Title III of the Superfund Amendments and Reauthorization Act of 1986 (SARA) Section 302 or Section 304 as identified in 40 CFR Part 355, Appendix A and B.

SARA Section 313

This product contains the following components in concentrations greater than 0.1% for carcinogenic substances and/or 1.0% of the substances subject to the reporting requirements of Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 and 40 CFR Part 372:

Ethyl Benzene (CASRN: 100-41-4): 0.1%

1,2,4 Trimethylbenzene (CASRN: 95-63-6): 2.7%

SARA Section 311 & 312 Classifications

Acute Hazard: NO

Chronic Hazard: YES

Fire Hazard: YES

Reactivity Hazard: NO

CERCLA

This product contains the following components listed under the Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA) in 40 CFR Part 302, Table 302.4:

Ethyl Benzene (CASRN: 100-41-4): 0.1% RQ=1,000 lbs.

CALIFORNIA PROP 65

This product contains chemical(s) known to the state of California to cause cancer and/or birth defects.

Clean Water Act / Oil Pollution Act

This product may be subject to regulation by Section 311 of the Clean Water Act and the Oil Pollution Act. Releases of the product into or leading to surface waters must be reported to the National Response Center at 1-800-424- 8802.

PA RIGHT TO KNOW ACT

This product contains the following components listed under the Pennsylvania Right To Know Act:

Stoddard Solvent (CASRN: 8052-41-3)

N-Decane (CASRN: 124-18-5)

N-Nonane (CASRN: 111-84-2)

1,2,4 Trimethylbenzene (CASRN: 95-63-6)

Ethyl Benzene (CASRN: 100-41-4)

Global Chemical Inventories

INVENTORY

COMPONENT

ALL COMPONENTS

US TSCA

Present*

EU

Present

JAPAN

Not available

AUSTRALIA

Present

NEW ZEALAND

Present

CANADA

Present

SWITZERLAND

Not Available

KOREA

Present

PHILIPPINES

Present

CHINA

Present

TAIWAN

Present

*May be subject to TSCA 12b export notification. Contains Nonane (CASRN: 111-84-2) at 7.85%.

16. OTHER INFORMATION

US NFPA Ratings

HEALTH	FIRE	INSTABILITY
1	2	0

HIMIS RATINGS

HEALTH	FIRE	PHYSICAL HAZARDS
1*	2	0

Precautionary Labels

Signal Word

WARNING!

Flammable liquid and vapor

Static accumulating liquid can become electrostatically charged even in bonded and grounded equipment; Sparks may ignite liquid and vapor may cause flash fire

Harmful if swallowed, can enter lungs and cause damage

May cause chronic effects

May cause skin irritation

May cause eye irritation

May cause respiratory tract irritation

Prolonged skin contact may cause irritation

The information provided on this MSDS is correct to the best of our knowledge, information and belief at the date of its publication. The information given is designed only as a guide for safe handling, use, processing, storage, transportation, disposal and release and is not to be considered as a warranty or quality specification. The information relates only to the specific material designated and may not be valid for such material used in combination with any other material or in any process, unless specified in the text.

Date Created: 4/7/2015

Date Updated: 4/7/2015



State of New Jersey

CHRIS CHRISTIE
Governor

DEPARTMENT of ENVIRONMENTAL PROTECTION
AIR QUALITY, ENERGY AND SUSTAINABILITY

BOB MARTIN
Commissioner

KIM GUADAGNO
Lt. Governor

Division of Air Quality
Bureau of Stationary Sources
401 E. State Street, 2nd floor, P.O. Box 420, Mail Code 401-02
Trenton, NJ 08625-0420

**Air Pollution Control
Preconstruction Permit and Certificate to Operate
Revision**

Permit Activity Number: PCP170004

Program Interest No: 05459

Mailing Address	Plant Location
DENNIS HUACON MGR TROY CHEMICAL CORP 1 AVE L Newark, NJ 07105	TROY CHEMICAL CORP 1 Avenue L Newark, Essex County, New Jersey

Approval Date: 09/05/2017

Expiration Date: 11/15/2020

The New Jersey Department of Environmental Protection (Department) has reviewed the above referenced air pollution control permit application. On the basis of the information provided, the Department concludes that the application satisfies all applicable requirements of the New Jersey Air Pollution Control regulations codified at N.J.A.C. 7:27 et seq. This Air Pollution Control Permit modification shall supersede any existing Air Pollution Control Permits issued for the specified source. This permit allows for inspection and evaluation of the equipment by the Department to assure conformance with all provisions of N.J.A.C. 7:27 et seq. and any other applicable federal requirements codified at 40 CFR 52, 60, 61 and 63.

This approval changes certain portions of the previously approved preconstruction permit, and this action does not change the current expiration date of the permit. This approval results in a permit that has replaced the one previously issued, Activity Number PCP 16-0001

The equipment, that is authorized to be installed and operated under this approval, is described in Section A, Source Operations and Section D, Equipment Inventory. Equipment at the facility referenced by this Permit shall be operated in accordance with the Conditions of Approval set forth in Section D, Facility Specific Requirements.

The Department hereby issues this permit and certificate under the authority of chapter 106, P.L. 1967(N.J.S.A 26:2C-9.2). You may construct, reconstruct, install, or modify the above referenced equipment and/or control apparatus consistent with the approval.

The approved Permit is available for download in PDF format which contains the facility's specific requirements (compliance plan) at: <http://www.nj.gov/dep/aqpp>. After accessing the web site, click on "Approved PCP Permits" listed under "Reports" and then type in your Program Interest (PI) Number, 05459, as instructed on the screen. You will be able to view, print or electronically store your permit. If you have any questions regarding this permit approval, please contact the Department at the Preconstruction Permit Help Line available from 9:00 AM to 4:00 PM daily, where you may speak to someone about any technical questions you may have. The Preconstruction Permit Technical Help Line number is 609-292-6716.

If, in your judgment as an applicant for an air pollution control permit, the Department is imposing any unreasonable Condition of Approval, you may contest the Department's decision and request a contested case hearing pursuant to the Administrative Code at N.J.A.C. 7:27-1.32(a). All requests for contested case hearings must be received in writing by the Department within twenty (20) calendar days of the date you receive this permit approval and must contain the information specified in the Administrative Hearing Request Checklist and Tracking Form.

If you have any non technical questions please use the Bureau's number 609- 292-0834. If you have any questions when filing a General Permit please use the General Permit Help number 609-633-2829.

Approved by:

A handwritten signature in black ink, appearing to read "Michael Adhanom", with a long horizontal flourish extending to the right.

Michael Adhanom
Preconstruction Permits

Administrative Hearing Request Checklist and Tracking Form

I. Document Being Appealed

Name of the Facility	Facility ID Number	Permit Activity Number	Issuance Date
TROY CHEMICAL CORP	05459	PCP170004	

II. Contact Information

Name of Person Requesting Hearing	Name of Attorney (if applicable)
Address:	Address:
Telephone:	Telephone:

III. Please include the following information as part of your request:

- A. The date the permittee received the permit decision;
- B. Two printed copies of the document being appealed – for submitting to address 1 below;
A PDF copy of the document being appealed on a CD – for submitting to address 2 below
- C. The legal and factual questions you are appealing;
- D. A statement as to whether or not you raised each legal and factual issues during the permit application process;
- E. Suggested revised or alternative permit conditions;
- F. An estimate of the time required for the hearing;
- G. A request, if necessary, for a barrier-free hearing location for physically disabled persons;
- H. A clear indication of any willingness to negotiate a settlement with the Department prior to the Departments processing of your hearing request to the Office of Administrative Law;

Mail this form, completed, signed and dated with all of the information listed above, including attachment, to:

- 1. New Jersey Department of Environmental Protection
Office of Legal Affairs
Attention: Adjudicatory Hearing Requests
401 E. State Street, P.O. Box 402
Trenton, New Jersey 08625
- 2. Mail Code: 401-02
New Jersey Department of Environmental Protection
Air Quality Program
P.O. Box 420
Trenton, New Jersey 08625-0420
Phone: (609) 633-2829

Signature

Date

Administrative Hearing Request Checklist and Tracking Form

IV. If you are not the applicant but rather an interested person claiming to be aggrieved by the permit decision, please include the following information:

1. The date you or your agent received notice of the permit decision (include a copy of that permit decision with your hearing request);
2. Evidence that a copy of the request has been delivered to the applicant for the permit which is the subject of the permit decision;
3. A detailed statement of which findings of fact and/or conclusion of law you are challenging;
4. A description of your participation in any public hearings held in connection with the permit application and copies of any written comments you submitted;
5. Whether you claim a statutory or constitutional right to a hearing, and, if you claim such a right, a reference to the applicable statute or explanation of how your property interests are affected by the permit decision;
6. If the appeal request concerns a CAFRA permit decision, evidence that a copy of the request has been delivered to the clerks of the county and the municipality in which the project which is the subject of the permit decision is located;
7. Suggested revised or alternative permit conditions;
8. An estimate of the time required for the hearing;
9. A request, if necessary, for a barrier-free hearing location for physically disable persons;
10. A clear indication of any willingness to negotiate a settlement with the Department prior to the Department's transmittal of the hearing request to the Office of Administrative Law;

Mail this form, completed, signed and dated with all of the information listed above, including attachment, to:

New Jersey Department of Environmental Protection
Office of Legal Affairs
Attention: Adjudicatory Hearing Requests
401 East State Street, P.O. Box 402
Trenton, New Jersey 08625-0402

Mail Code: 401-02
New Jersey Department of Environmental Protection
Air Quality Program
P.O. Box 420
Trenton, New Jersey 08625-0420
Phone: (609) 633-2829

Signature

Date

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Table of Contents

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

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AUTHORIZED SOURCE OPERATIONS

Section B

ACRONYMS

Section C

GENERAL PROVISIONS AND AUTHORITIES

Section D

PERMIT INFORMATION

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Section A

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

AUTHORIZED SOURCE OPERATIONS

This Preconstruction Permit and the Certificate to Operate for the following equipment is issued pursuant to N.J.A.C. 7:27-8.

Description of Source Activity

Source Operation Type: Chemical Process

Source Operation Description: Chemical Process including Reactor/receiver, fractionators and process/storage tanks used to manufacture specialty chemicals. Methanol is recovered from the process using fractionators. Methanol emissions are controlled with a packed tower scrubber and are below the reporting threshold. Reportable VOC PTE <= 0.1 tpy and TSP/PM-10 PTE <= 1.06 tpy.

Source Operation Details: The sources authorized by this permit shall be operated within the parameters specified in the Equipment, Control Device, and/or Emission Unit/Batch Process Operating Scenario Details of this permit. Operation of the authorized sources within these parameters is required in addition to compliance with the conditions specified in Section D– Facility Specific Requirements.

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Section B

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

ACRONYMS

CEMS	Continuous Emissions Monitor System
CFR	Code of Federal Regulations
CO	Carbon Monoxide
COMS	Continuous Opacity Monitor System
EPA	United States Environmental Protection Agency
EMS	Emission Measurement Section - NJDEP
HAP	Hazardous Air Pollutant
N.J.A.C.	New Jersey Administrative Code
NJDEP	New Jersey Department of Environmental Protection
NOx	Oxides of Nitrogen
PM-2.5	All particulate matter having an aerodynamic diameter less than or equal to a nominal 2.5 microns
PM-10	All particulate matter having an aerodynamic diameter less than or equal to a nominal 10 microns
PST	Performance Specification Test
REO	Regional Enforcement Office - NJDEP
SO ₂	Sulfur Dioxide
TSP	Total Suspended Particulate Matter
VOC	Volatile Organic Compounds

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Section C

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

GENERAL PROVISIONS AND AUTHORITIES **Preconstruction Permits**

1. Notwithstanding compliance with other provisions of N.J.A.C. 7:27-1 et seq., no person shall cause, suffer, allow or permit to be emitted into the outdoor atmosphere substances in quantities which shall result in air pollution as defined at N.J.A.C. 7:27-5.1. [N.J.A.C. 7:27-5.2(a)]
2. The permittee shall not construct, reconstruct, install, or modify a significant source or control apparatus serving the significant source without first obtaining a preconstruction permit under N.J.A.C. 7:27-8. [N.J.A.C. 7:27-8.3(a)]
3. The permittee shall not operate (nor cause to be operated) a significant source or control apparatus serving the significant source without a valid operating certificate. [N.J.A.C. 7:27-8.3(b)]
4. Permit Revisions:

The permittee shall not take any action which requires a permit revision, compliance plan change, seven-day-notice change, amendment, or change to a batch plant permit, under any applicable provision at N.J.A.C. 7:27-8.17 through 8.23, without complying with that applicable provision.

The following summarize N.J.A.C. 7:27-8.18 through 8.21:

- a. The permittee shall file a permit revision request and receive approval from the Department prior to increasing any maximum allowable emission limit, increasing actual emissions, to a rate or concentration greater than a maximum allowable emission, causing the emissions of a new air contaminant, use a new raw material, reconstructing equipment, change the ground level concentration of an air contaminant in an area where the public has access, replace the permitted source, or constructing or installing a new significant source. [N.J.A.C. 7:27-8.18]
- b. The permittee shall file a compliance plan change request and receive approval from the Department prior to decreasing the frequency of testing, monitoring, recordkeeping, or reporting, changing the monitoring method, changing a level, rate, or limit of an operational parameter included in the conditions, or reducing a source's potential to emit. [N.J.A.C. 7:27-8.19]
- c. At least seven days prior to proceeding with a physical or operational change that is outside the scope of activities allowed by this permit, but will not increase emissions over the allowable emissions and will not alter the stack

characteristics, the permittee shall file a seven-day-notice change. The permittee may proceed with the proposed changes seven days after such notice is filed with the Department. [N.J.A.C. 7:27-8.20]

- d. The permittee shall file an amendment within 120 days of making any change of the information which allows the Department to identify and contact the permittee, changing the name, number or designation of any equipment or stack covered by this permit, changing the parameters of a stack in such a way to reduce the ground level concentration of an air contaminant, or correction of a typographical error that will not result in an increase of actual or allowable emissions. [N.J.A.C. 7:27-8.21]

The permittee shall review the provisions of N.J.A.C. 7:27-8.18 through 7:27-8.21 to determine the appropriate type of request to file.

5. The permittee shall make the preconstruction permit or certificate, together with any amendments, seven-day-notices, or other documents related to the permit and certificate, readily available for Department inspection on the operating premises. [N.J.A.C. 7:27-8.3(d)]
6. The permittee shall not use or cause to be used the equipment or control apparatus unless all components connected or attached to, or serving, the equipment or control apparatus, are functioning properly and are in compliance with the preconstruction permit and certificate and all conditions and provisions thereto. [N.J.A.C. 7:27-8.3(e)]
7. A preconstruction permit is not transferable either from the location authorized in the preconstruction permit to another location, or from any one piece of control apparatus or equipment to another piece of control apparatus or equipment. [N.J.A.C. 7:27-8.3(f)]
8. Once a permit or certificate is issued, the permittee is fully responsible for compliance with N.J.A.C. 7:27-8 and with the permit and certificate, including adequate design, construction, and operation of the source, even if employees, contractors, or others work on or operate the permitted source. If the Department issues any other requirement with the force of law, such as an order, which applies to the source, the permittee is also responsible for compliance with that requirement. [N.J.A.C. 7:27-8.3(g)]
9. Preconstruction permits and certificates do not any way relieve the permittee from the obligation to obtain necessary permits from other government agencies and to comply with all other applicable Federal, State, and local rules and regulations. [N.J.A.C. 7:27-8.3(h)]
10. The permittee shall not suffer, allow, or permit any air contaminant detectable by the sense of smell, to be present in the outdoor atmosphere in such quantity and duration which is, or tends to be, injurious to human health or welfare, animal or plant life or property, or would unreasonably interfere with the enjoyment of life or property. This shall not include an air contaminant which occurs only in areas over which the permittee has exclusive use or occupancy. In determining whether an odor unreasonably interferes with the enjoyment of life or property, the Department shall consider all of the relevant facts and circumstances, including, but not limited to, the character, severity, frequency, and duration of the odor, and the number of persons affected thereby. In considering these and other relevant facts and circumstances, no one factor shall be dispositive, but each shall be considered relevant in determining whether an odor interferes with the enjoyment of life or property, and, if so, whether such interference is unreasonable considering all of the circumstances. [N.J.A.C. 7:27-8.3(j)]

11. The Department and its representatives have the right to enter and inspect any facility or property in accordance with N.J.A.C. 7:27-1.31. [N.J.A.C. 7:27-8.3(m)]
12. There shall be an affirmative defense to liability for penalties for a violation of a preconstruction permit or certificate occurring as a result of an equipment malfunction, an equipment start-up, an equipment shutdown, or during the performance of necessary maintenance. The affirmative defense shall be asserted and established as required pursuant to P.L. 1993. c.89 (adding N.J.S.A. 26:2C-19.1 through 2C-19.5) and any rules the Department promulgates thereunder, and shall meet all of the requirements thereof. There shall also be an affirmative defense to liabilities for penalties or other sanctions for noncompliance with any technology based emission limitation in this permit or certificate, if the noncompliance was due to an emergency as defined at N.J.A.C. 7:27-22.1, provided that the affirmative defense is asserted and established in compliance with 40 CFR 70.6(g) and meets all requirements thereof. [N.J.A.C. 7:27-8.3(n)]
13. The permittee shall not cause or use the equipment specified in a preconstruction permit in a manner that will result in the emission of any air contaminant not listed in the Facility Specific Requirements in this Preconstruction Permit at a rate equal to or higher than the applicable reporting threshold set forth at N.J.A.C. 7:27-8 Appendix I, Table A or B. [N.J.A.C. 7:27-8.4(k)1]
14. No air contaminant, or category of air contaminant, where accepted by the Department, shall be emitted other than those approved in the preconstruction permit. [N.J.A.C. 7:27-8.13(a)]
15. Any person to whom the Department has issued a preconstruction permit or certificate shall comply with all terms and conditions of any order related to the preconstruction permit or certificate. [N.J.A.C. 7:27-8.13(a)]
16. The permittee shall maintain all records required in the preconstruction permit for a period of five (5) calendar years from the calendar year within which the record was generated. [N.J.A.C. 7:27-8.13(a)]
17. The Department may change the conditions of approval of any approved certificate to operate at the time of renewal of a temporary operating certificate; at the time of approval or renewal of a five-year operating certificate; or at any time during the period a certificate is in effect, if the Department determines that such change is necessary to protect human health or welfare or the environment. [N.J.A.C. 7:27-8.13(b)]
18. Upon request of the Department, the permittee shall submit to the Department information relevant to the operation of equipment and control apparatus including all information specified at N.J.A.C. 7:27-8.13(c). [N.J.A.C. 7:27-8.13(c)]
19. If the conditions of a preconstruction permit or certificate to operate require the Department to incur any of the following charges, the permittee shall reimburse the Department for the full amount of these charges: (1) The charges billed by any phone company for the maintenance of a dedicated telephone line required by this permit or the certificate to operate for the electronic transmission of data; or (2) The charges billed by any laboratory for performing the analysis of audit samples collected pursuant to testing or monitoring required by this permit or the certificate to operate. [N.J.A.C. 7:27-8.13(g)]

20. Any exceedance of the operating requirements or emission concentrations specified in a preconstruction permit shall be reported within three (3) business days, by writing to the Regional Enforcement Office. [N.J.A.C. 7:27-8.13(h)]
21. The permittee shall, when requested by the Department, provide such testing facilities exclusive of instrumentation and sensing devices as may be necessary for the Department to determine the kind and amount of air contaminants emitted from the equipment or control apparatus. The testing facilities shall include the utilities, the structure to hold testing equipment and/or personnel, and any ports in stacks needed to carry out testing required by this permit. During testing by the Department, the equipment and control apparatus shall be operated under such conditions within their capacities as may be requested by the Department. The test facilities may be either permanent or temporary, at the discretion of the person responsible for their provision, and shall conform to all applicable laws, regulations, and rules concerning safe construction and safe practice. Testing facilities, which contain platforms and other means of personnel access, shall conform to OSHA standards. [N.J.A.C. 7:27-8.13(i)]
22. Upon request of the Department, the permittee shall submit to the Department any record relevant to any permit or certificate. Such records shall be submitted to the Department within thirty (30) days of the request by the Department or within a longer time period if approved in writing by the Department. [N.J.A.C. 7:27-8.15(a)]
23. The permittee shall submit any required report in a format and on a schedule approved by the Department. Such report shall be transmitted on paper, on computer disk, or electronically, at the discretion of the Department. [N.J.A.C. 7:27-8.15(b)]
24. Any report submitted to the Department, including but not limited to, a report submitted as an amendment of this permit or the certificate to operate pursuant to N.J.A.C. 7:27-8.3(c) shall include, as an integral part of the report, certifications complying with N.J.A.C. 7:27-1.39. [N.J.A.C. 7:27-8.15(c)]
25. Upon request of the Department, the permittee shall report on forms obtained from the Department the air contaminant actual emissions and information relevant thereto, of any air contaminant or category of air contaminant emitted by the equipment, control apparatus, or source operation. [N.J.A.C. 7:27-8.15(d)]
26. Any emission limit values in a preconstruction permit shall be interpreted to be followed by inherent trailing zeros (0) in the decimal portion of the limit to three significant figures (e.g. a printed limit of "1 lb/hr" means a limit of "1.00 lb/hr").
27. This listing of requirements reflects the state rules and regulations that apply to a majority of sources. If a specific requirement in a rule or regulation that applies to a permittee is not included in this section or in the Facility Specific Requirements it does not relieve the permittee from the obligation to comply with that regulation.
28. Process monitors must be operated at all times when the associated process equipment is operating except during outage time allowed by Department guidelines/procedures or as outlined in Technical Manual 1005. The Permittee must keep a service log as required.
29. Each permittee shall meet all requirements of the approved source emissions testing and monitoring protocol during the term of the operating permit. Whenever the facility makes a replacement, modification, change or repair of a certified CEMS or COMS that may significantly affect the ability of the system to accurately measure or record data, the facility must recertify the CEMS or COMS in accordance with Section V.B. and

Appendix E of Technical Manual 1005. The facility is responsible for contacting the Emission Measurement Section to determine the need for recertification and/or to initiate the recertification process. The facility is responsible for any downtime associated with the replacement, modification, change or repair of the CEMS or COMS. [N.J.A.C. 7:27-8.13(d)]

30. The following Department offices may be referenced in a preconstruction permit. Please use the following addresses when submitting any correspondence to these offices:

Emission Measurement Section
Mail Code: 09-01, P.O. Box 420
Trenton, NJ 08625-0420

Central Regional Enforcement Office
P. O. Box 407
Trenton, NJ 08625-0407

Northern Regional Enforcement Office
7 Ridgedale Avenue
Cedar Knolls, NJ 07927

Southern Regional Enforcement Office
2 Riverside Drive – Suite 201
Camden, NJ 08102

31. In accordance with the Air Pollution Control Act at N.J.S.A. 26:2C-19(e), any operation of the equipment which may cause off-property effect, including odors, shall be immediately reported by calling the NJDEP Environmental Action Hotline at (877) 927-6337.
32. In accordance with N.J.A.C. 7:27-21, facilities are required to submit annual emission statements of their actual emissions if the Potential-to-emit for the entire facility exceeds the following thresholds (including all emissions from the facility, both permitted and unpermitted). Additional information about Emission Statement reports can be obtained by calling (609) 984-5483.

<u>AIR CONTAMINANT</u>	<u>Threshold in Tons per Year</u>
VOC (Volatile Organic Compounds)	10
NO _x (Oxides of Nitrogen)	25
CO (Carbon Monoxide)	100
SO ₂ (Sulfur Dioxide)	100
TSP (Total Suspended Particulates)	100
PM _{2.5} (Particulate Matter ≤ 2.5 microns)	100
PM ₁₀ (Particulate Matter ≤ 10 microns)	100
NH ₃ (Ammonia)	100
Lead	5

33. In accordance with N.J.A.C. 7:27-22, facilities are required to submit a Title V Operating Permit application, within one year, if the potential-to-emit for the entire facility exceeds any of the following thresholds (including all emissions from the facility, both permitted and unpermitted). Additional Information about Operating Permits can be obtained by calling the Operating Permit Hotline at (609) 633-8248.

<u>AIR CONTAMINANT</u>	<u>Threshold in Tons per Year</u>
VOC (Volatile Organic Compounds)	25
NO _x (Oxides of Nitrogen)	25
CO (Carbon Monoxide)	100
SO ₂ (Sulfur Dioxide)	100
TSP (Total Suspended Particulates)	100
PM ₁₀ (Particulate Matter ≤ 10 microns)	100
Lead	10
Any HAP (Hazardous Air Pollutant)	10
All HAPs Collectively	25
Any other Air Contaminant	100

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Section D

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

PERMIT INFORMATION

FACILITY SPECIFIC REQUIREMENTS INDEX

FACILITY SPECIFIC REQUIREMENTS

REASON FOR APPLICATION

FACILITY PROFILE (GENERAL)

EQUIPMENT INVENTORY

CONTROL DEVICE INVENTORY

EMISSION POINT INVENTORY

EMISSION UNIT/BATCH PROCESS INVENTORY

AIR POLLUTION CONTROL PRECONSTRUCTION PERMIT

Section D

Facility Name: TROY CHEMICAL CORP

Facility ID No.: 05459

Permit Activity No.: PCP170004

FACILITY SPECIFIC REQUIREMENTS INDEX

<u>Subject Item and Name</u>	<u>Page Number</u>
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OS1 T-203 fresh methanol tank normal operation	6
OS2 T-206 recovered methanol tank normal operation	7
OS3 R-7149 part 2 Reactor Normal Operation	8
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PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System
CD3 SC-7154 Methanol Scrubber

Subject Item:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	The scrubber shall be operated at all times that materials are being processed. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
2	Flowrate of Scrubbing Medium at Scrubber Inlet ≥ 0.1 and Flowrate of Scrubbing Medium at Scrubber Inlet ≤ 5 gal/min. [N.J.A.C. 7:27- 8.13(a)]	Flowrate of Scrubbing Medium at Scrubber Inlet: Monitored by scrubber flow rate instrument each month during operation, based on an instantaneous determination. The permittee shall install, calibrate and maintain the monitor(s) in accordance with the manufacturer's specifications. The monitor(s) shall be ranged such that the allowable value is approximately mid-scale of the full range current/voltage output. [N.J.A.C. 7:27- 8.13(d)2ii]	Flowrate of Scrubbing Medium at Scrubber Inlet: Recordkeeping by manual logging of parameter each month during operation. [N.J.A.C. 7:27- 8.13(d)3]	None.
3	Pressure Drop Across the Scrubber ≥ 1 and Pressure Drop Across the Scrubber ≤ 7 inches w.c.. [N.J.A.C. 7:27- 8.13(a)]	Pressure Drop Across the Scrubber: Monitored by pressure drop Instrument each month during operation, based on an instantaneous determination. The permittee shall install, calibrate and maintain the monitor(s) in accordance with the manufacturer's specifications. The monitor(s) shall be ranged such that the allowable value is approximately mid-scale of the full range current/voltage output. [N.J.A.C. 7:27- 8.13(d)2ii]	Pressure Drop Across the Scrubber: Recordkeeping by manual logging of parameter each month during operation. [N.J.A.C. 7:27- 8.13(d)3]	None.
4	VOC Control Efficiency ≥ 99 %. [N.J.A.C. 7:27- 8.13(h)]	None.	VOC Control Efficiency: Recordkeeping by manual logging of parameter or storing data in a computer data system upon request of the Department. Manufacturer's information. [N.J.A.C. 7:27- 8.13(d)]	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS Summary

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	The equipment covered by this application is limited in operation to the material use rates, operating hours, and emission rates presented in the application. It is the responsibility of the applicant to demonstrate to representatives of the Department that these limitations are not being exceeded. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
2	TSP <= 1.06 tons/yr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
3	PM-10 (Total) <= 1.06 tons/yr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
4	VOC (Total) <= 0.1 tons/yr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
5	Maximum No. of Billable Compliance Inspections <= 2 inspections over the life of the Operating Certificate. The permittee will be invoiced for a service fee per inspection pursuant to N.J.A.C. 7:27-8.6 after the periodic compliance inspection is conducted. [N.J.A.C. 7:27- 8.13(e)]	None.	None.	None.

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
6	<p>Utilize procedures for each operating scenario that ensures compliance with the emission limits (pounds per batch and pounds per step) specified for each pollutant.</p> <p>The permittee shall keep and maintain and have readily available at the facility operating instructions, batch sheets, batch records or standard operating procedures (SOPs) for the batch products or processes.</p> <p>The permittee shall ensure that each batch process is run in accordance with the operating instructions, batch sheets, batch records, SOPs and supporting documentation. [N.J.A.C. 7:27-16.16]</p>	<p>Other: The permittee shall establish and maintain an environmental management system to ensure compliance with the operating instructions, batch sheets, batch records or standard operating procedures for each product or process.[N.J.A.C. 7:27-8.13].</p>	<p>Other: The operating instructions, batch sheets, batch records or SOPs for each product or process shall include, at a minimum, the following information:</p> <ol style="list-style-type: none"> 1. Product / date produced; 2. A list of equipment or sets used; 3. A list of control devices or sets used and their operational parameters; and 4. A list of all raw materials including HAPs used.[N.J.A.C. 7:27- 8.13]. 	None.

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
7	No Visible Emissions, exclusive of condensed water vapor, except for no more than 3 minutes in any consecutive 30-minute period. [N.J.A.C. 7:27- 8.13(a)]	Monitored by visual determination each month during operation. Conduct visual opacity inspections during daylight hours to identify if the stack has visible emissions, other than condensed water vapor. Select an observation position enabling clear view of emission point(s), minimum 15 feet away without sunlight shining directly into the eyes. Observe for a minimum duration of 30 minutes. Clock observation with two stopwatches starting the 1st watch at the commencement of the 30-minute observation period and starting and stopping the 2nd watch every time visible emissions are first seen and when they cease, and record the observation. If visible emissions are observed for more than 3 minutes in the 30-consecutive minutes: (1) Verify the equipment and/or control device causing visible emissions is operating according to manufacturer's specifications. If it is not operating properly, take corrective action immediately to eliminate the excess emissions. (2) If the opacity problem is not corrected within 24 hours, perform a check via a certified opacity reader, in accordance with N.J.A.C. 7:27B-2. Conduct such test each day until the opacity problem is successfully corrected. [N.J.A.C. 7:27- 8.13(d)]	Recordkeeping by manual logging of parameter or storing data in a computer data system each month during operation. Record and retain the following: (1) Date and time of inspection; (2) Emission Point number; (3) Operational status of equipment; (4) Observed results and conclusions; (5) Description of corrective action taken if needed; (6) Date and time opacity problem was solved, if applicable; (7) N.J.A.C. 7:27B-2 results if conducted; and (8) Name of person(s) conducting inspection. [N.J.A.C. 7:27- 8.13(d)]	None.
8	Total Throughput <= 2,400 kg batch quantity of iodine. [N.J.A.C. 7:27- 8.13(h)]	None.	Recordkeeping by production records once per batch during operation. The quantity of raw material prills to the process will be recorded based on what is loaded to E-22 and E-30. [N.J.A.C. 7:27- 8.13(d)]	None.

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
9	No person shall cause, suffer, allow, or permit the transfer of any applicable VOC into any receiving vessel having a maximum capacity of 2,000 gallons (7,570 liters) or greater unless such transfer is made through a submerged fill pipe. This subsection shall not apply to a transfer to a manufacturing process vessel installed before December 17, 1979 [N.J.A.C. 7:27-16.4(b)]	None.	None.	None.

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**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS1 T-203 fresh methanol tank normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS2 T-206 recovered methanol tank normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS3 R-7149 Part 2 Reactor Normal Operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	VOC (Total) <= 0.12 lb/hr. [N.J.A.C. 7:27-8.13(a)]	Other: Conduct an analysis of the source operation, which demonstrate that, under operating conditions that maximize the VOC emissions after any control, the VOC emission rate of the source operation is in compliance with N.J.A.C. 7:27-16.16.[N.J.A.C. 7:27-16.16(g)2ii].	Other: maintain process records sufficient to demonstrate whether the VOC emission rate of the source operation from actual operations does not exceed the VOC emission rate under operating conditions.[N.J.A.C. 7:27-16.16(g)1ii].	None.
2	The maximum emission rates of any other air contaminants not listed in the Facility Specific Requirements must be below the Reporting Threshold in N.J.A.C. 7:27-8, Appendix I [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
3	Maximum batches <= 840 batches per year. [N.J.A.C. 7:27- 8.13(h)]	None.	Recordkeeping by production records once per batch during operation. [N.J.A.C. 7:27-8.13(d)]	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System
OS4 24" Fractionator normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS5 36" Fractionator normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS6 T-7152B Slurry Tank Normal Operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	VOC (Total) <= 0.12 lb/hr. [N.J.A.C. 7:27-8.13(a)]	Other: Conduct an analysis of the source operation, which demonstrate that, under operating conditions that maximize the VOC emissions after any control, the VOC emission rate of the source operation is in compliance with N.J.A.C. 7:27-16.16.[N.J.A.C. 7:27-16.16(g)2ii].	Other: maintain process records sufficient to demonstrate whether the VOC emission rate of the source operation from actual operations does not exceed the VOC emission rate under operating conditions.[N.J.A.C. 7:27-16.16(g)1ii].	None.
2	The maximum emission rates of any other air contaminants not listed in the Facility Specific Requirements must be below the Reporting Threshold in N.J.A.C. 7:27-8, Appendix I [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
3	Maximum batches <= 840 batches per year. [N.J.A.C. 7:27- 8.13(h)]	None.	Recordkeeping by production records once per batch during operation. [N.J.A.C. 7:27-8.13(d)]	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS7 T-7115 mother liquor water rinse tank normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System
OS8 T-7119 mother liquor tank normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS9 1500 gallon receiver normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	Emissions for all contaminants are below the respective reporting thresholds, as stated in N.J.A.C. 7:27-8. Appendix I, Table A and B. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS11 Iodine Feed Hopper

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	TSP <= 0.24 lb/hr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
2	PM-10 (Total) <= 0.24 lb/hr. [N.J.A.C. 7:27- 8.h]	None.	None.	None.
3	All other emissions from the equipment covered by this permit are stated to be below the reporting thresholds as stated in N.J.A.C. 7:27-8, Appendix 1, Tables A & B. The permittee shall be able to demonstrate that all other emissions are maintained below reporting thresholds. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.

PCP170004

**New Jersey Department of Environmental Protection
Facility Specific Requirements**

Emission Unit: U2 Methanol Recovery System

OS12 R7102 Reactor 1,500gal normal operation

Operating Scenario:

Ref.#	Applicable Requirement	Monitoring Requirement	Recordkeeping Requirement	Submittal/Action Requirement
1	TSP <= 0.11 lb/hr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
2	PM-10 (Total) <= 0.11 lb/hr. [N.J.A.C. 7:27- 8.13(h)]	None.	None.	None.
3	VOC (Total) <= 0.07 lb/hr. [N.J.A.C. 7:27- 8.13(a)]	Other: Conduct an analysis of the source operation, which demonstrate that, under operating conditions that maximize the VOC emissions after any control, the VOC emission rate of the source operation is in compliance with N.J.A.C. 7:27-16.16.[N.J.A.C. 7:27-16.16(g)2ii].	Other: maintain process records sufficient to demonstrate whether the VOC emission rate of the source operation from actual operations does not exceed the VOC emission rate under operating conditions.[N.J.A.C. 7:27-16.16(g)1ii].	None.
4	All other emissions from the equipment covered by this permit are stated to be below the reporting thresholds as stated in N.J.A.C. 7:27-8, Appendix 1, Tables A & B. The permittee shall be able to demonstrate that all other emissions are maintained below reporting thresholds. [N.J.A.C. 7:27- 8.13(d)]	None.	None.	None.
5	Total throughput <= 455 Kg of iodine per batch. [N.J.A.C. 7:27- 8.13(h)]	None.	Recordkeeping by production records once per batch during operation. [N.J.A.C. 7:27- 8.13(h)]	None.
6	Maximum batches <= 50 batches per year. [N.J.A.C. 7:27- 8.13(h)]	None.	Recordkeeping by production records once per batch during operation. [N.J.A.C. 7:27- 8.13(d)]	None.

TROY CHEMICAL CORP (05459)
PCP170004

Date: 9/5/2017

New Jersey Department of Environmental Protection
Reason for Application

Permit Being Modified

Permit Class: PCP **Number:** 160001

Description of Modifications: Troy Chemical Corp is submitting this RADIUS application to remove two pieces of currently permitted equipment and add two new pieces of equipment. Please remove E22 and E25 from the current permit. The new pieces of equipment being added in this revision are listed in this application file along with their respective equipment details, potentials to emit, and operating scenarios.

The anticipated costs associated with this permit are \$2,527 for a permit revision plus \$590 for one additional piece of equipment for a grand total of \$3,117.

For all questions or comments please contact our consultant, Jeffrey Fedors at Baron Environmental Associates at 908-508-9000 or jeffrey.fedors@baronenv.com.

TROY CHEMICAL CORP (05459)
PCP170004

Date: 9/5/2017

New Jersey Department of Environmental Protection
Facility Profile (General)

Facility Name (AIMS): Troy Chemical Corp

Facility ID (AIMS): 05459

Street 1 AVE L
Address: NEWARK, NJ 07105

Mailing 1 AVE L
Address: NEWARK, NJ 07105

County: Essex
Location
Description:

State Plane Coordinates:

X-Coordinate:

Y-Coordinate:

Units:

Datum:

Source Org.:

Source Type:

Industry:

Primary SIC: 2851

Secondary SIC:

NAICS: 325510

New Jersey Department of Environmental Protection
Facility Profile (General)

Contact Type: Air Permit Information Contact

Organization: Troy Chemical Corporation

Org. Type: Corporation

Name: Dennis Huacon

NJ EIN:

Title: ERA Manager

Phone: (973) 589-3250 x

Mailing 1 Ave L

Fax: (973) 589-0490 x

Address: Newark, NJ 07105

Other: () - x

Type:

Email: huacond@troycorp.com

Contact Type: Environmental Officer

Organization: Troy Chemical Corporation

Org. Type: Private

Name: Edward Capasso

NJ EIN:

Title: Director, Environmental & Regulatory Af

Phone: (973) 589-2500 x

Mailing One Avenue L

Fax: (973) 589-0490 x

Address: Newark, NJ 07105

Other: () - x

Type:

Email: capassoe@troycorp.com

Contact Type: Fees/Billing Contact

Organization: Troy Chemical Corporation

Org. Type: Corporation

Name: Dennis Huacon

NJ EIN:

Title: ERA Manager

Phone: (973) 589-3250 x

Mailing 1 Ave L

Fax: (973) 589-0490 x

Address: Newark, NJ 07105

Other: () - x

Type:

Email: huacond@troycorp.com

New Jersey Department of Environmental Protection
Facility Profile (General)

Contact Type: General Contact

Organization: Troy Corporation

Org. Type: Corporation

Name: Dennis Huacon

NJ EIN:

Title: ERA Manager

Phone: (973) 589-2500 x

Mailing Address: One Avenue L

Fax: (973) 589-0490 x

Newark, NJ 07105

Other: () - x

Type:

Email: huacond@troycorp.com

Contact Type: On-Site Manager

Organization: Troy Chemical Corporation

Org. Type: Private

Name: William Rudlof

NJ EIN:

Title: Director, Environmental & Regulatory Af

Phone: (973) 589-2500 x

Mailing Address: One Avenue L

Fax: (973) 589-0490 x

Newark, NJ 07105

Other: () - x

Type:

Email: capassoe@troycorp.com

Contact Type: Responsible Official

Organization: Troy Chemical Corporation

Org. Type: Corporation

Name: Dennis Huacon

NJ EIN:

Title: ERA Manager

Phone: (973) 589-3250 x

Mailing Address: 1 Ave L

Fax: (973) 589-0490 x

Newark, NJ 07105

Other: () - x

Type:

Email: huacond@troycorp.com

**New Jersey Department of Environmental Protection
Equipment Inventory**

Equip. NJID	Facility's Designation	Equipment Description	Equipment Type	Certificate Number	Install Date	Grand- Fathered	Last Mod. (Since 1968)	Equip. Set ID
E20	T-203	T-203 Fresh Methanol Tank	Storage Vessel	PCP960023		No		
E21	T-206	T-206 Recovered Methanol Tank	Storage Vessel			No		
E23	24" Frac	24" Fractionator	Manufacturing and Materials Handling Equipment	PCP960037		No		
E24	36" Frac	36" Fractionator	Manufacturing and Materials Handling Equipment	PCP960015		No		
E26	T-7115	T-7115 Mother Liquor Water Rinse Tank	Manufacturing and Materials Handling Equipment			No		
E27	T-7119	T-7119 Mother Liquor Tank	Manufacturing and Materials Handling Equipment	PCP960021		No		
E28	T-7141D	1500 gallon Receiver	Manufacturing and Materials Handling Equipment			No		
E30	Iodine Load3	Satellite Iodine Feed Hopper	Manufacturing and Materials Handling Equipment		8/1/2012			
E31	R7102	7102 Reactor - 1,500 gallons	Manufacturing and Materials Handling Equipment					

TROY CHEMICAL CORP (05459)
PCP170004

Date: 9/5/2017

New Jersey Department of Environmental Protection
Equipment Inventory

Equip. NJID	Facility's Designation	Equipment Description	Equipment Type	Certificate Number	Install Date	Grand- Fathered	Last Mod. (Since 1968)	Equip. Set ID
E32	R-7149	R-4179 Part 2 Reactor	Manufacturing and Materials Handling Equipment		9/1/2017			
E33	T-7152B	T-7152B Slurry Tank	Manufacturing and Materials Handling Equipment		9/1/2017			

TROY CHEMICAL CORP (05459)
PCP170004

Date: 9/5/2017

New Jersey Department of Environmental Protection
Control Device Inventory

CD NJID	Facility's Designation	Description	CD Type	Install Date	Grand- Fathered	Last Mod. (Since 1968)	CD Set ID
CD3	SC-7154	SC-7154 Methanol Scrubber	Scrubber (Packed Tower)		No		

TROY CHEMICAL CORP (05459)
PCP170004

Date: 9/5/2017

New Jersey Department of Environmental Protection
Emission Points Inventory

PT NJID	Facility's Designation	Description	Config.	Equiv. Diam. (in.)	Height (ft.)	Dist. to Prop. Line (ft)	Exhaust Temp. (deg. F)			Exhaust Vol. (acfm)			Discharge Direction	PT Set ID
							Avg.	Min.	Max.	Avg.	Min.	Max.		
PT3	SC-7154	Methanol Scrubber Stack	Round	3	45	70	70.0	60.0	100.0	3.5	0.0	50.0	Up	
PT4	Iodine Load	Satelite Iodine Loading Exhaust	Round	9	20	70	55.0	35.0	95.0	600.0	0.0	600.0	Up	

New Jersey Department of Environmental Protection
Emission Unit/Batch Process Inventory

U 2 Meth Rec Methanol Recovery System

UOS NJID	Facility's Designation	UOS Description	Operation Type	Signif. Equip.	Control Device(s)	Emission Point(s)	SCC(s)	Annual Oper. Hours		VOC Range	Flow (acfm)		Temp. (deg F)	
								Min.	Max.		Min.	Max.	Min.	Max.
OS1	T-203	T-203 fresh methanol tank normal operation	Normal - Steady State	E20	CD3 (P)	PT3		0.0	8,760.0		0.0	4.0	0.0	50.0
OS2	T-206	T-206 recovered methanol tank normal operation	Normal - Steady State	E21	CD3 (P)	PT3		0.0	8,760.0		0.0	2.0	0.0	50.0
OS3	R-7149	R-7149 Part 2 Reactor Normal Operation	Normal - Steady State	E32	CD3 (P)	PT3 PT4		0.0	8,760.0	A	0.0	100.0	0.0	70.0
OS4	24" Frac	24" Fractionator normal operation	Normal - Steady State	E23	CD3 (P)	PT3		0.0	8,760.0		0.0	3.0	0.0	100.0
OS5	36" Frac	36" Fractionator normal operation	Normal - Steady State	E24	CD3 (P)	PT3		0.0	8,760.0		0.0	3.2	0.0	50.0
OS6	T-7152B	T-7152B Slurry Tank Normal Operation	Normal - Steady State	E33	CD3 (P)	PT3		0.0	8,760.0	A	0.0	100.0	0.0	40.0
OS7	T-7115	T-7115 mother liquor water rinse tank normal operation	Normal - Steady State	E26	CD3 (P)	PT3		0.0	8,760.0		0.0	4.4	0.0	50.0
OS8	T-7119	T-7119 mother liquor tank normal operation	Normal - Steady State	E27	CD3 (P)	PT3		0.0	8,760.0		0.0	1.0	0.0	50.0
OS9	T-7141D	1500 gallon receiver normal operation	Normal - Steady State	E28	CD3 (P)	PT3		0.0	8,760.0		0.0	1.0	0.0	50.0
OS11	Iodine Load3	Iodine Feed Hopper	Normal - Steady State	E30		PT4	3-01-830-01	0.0	8,760.0	A	0.0	600.0	35.0	95.0
OS12	R-7102	R7102 Reactor 1,500gal normal operation	Normal - Steady State	E31	CD3 (P)	PT3 PT4		0.0	8,760.0	B	0.0	3.7	0.0	80.0

PHOTO 1





**Spill
Response Kit**

CAUTION: Read & follow directions for use inside the kit. Disposal must be in accordance with local, state and federal regulations. It is the users responsibility to evaluate and verify the suitability of contents with specific requirements. Only properly trained and equipped personnel should attempt the clean-up of hazardous or toxic spills.

Universal Spill Response Kit
Item # 1234

NON-HAZARDOUS
MATERIALS
ONLY



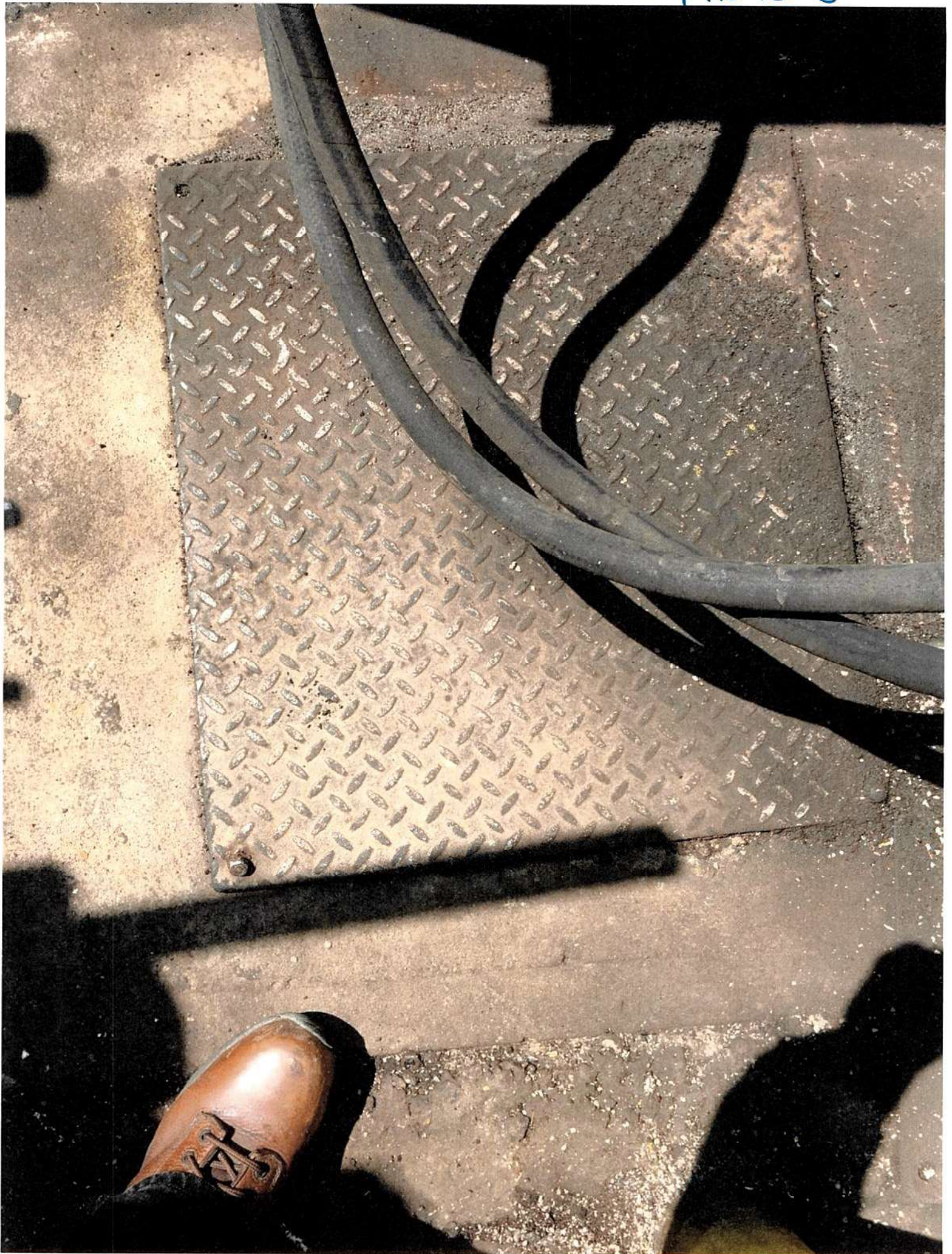
**UNIVERSAL
WASTE
LAMPS**

Accumulation Start Date:

09-06-18

88.640.6700





UPS Freight 903 275 796 STO

HAZARDOUS WASTE

FEDERAL AND/OR STATE LAWS PROHIBIT IMPROPER DISPOSAL
IF FOUND, CONTACT THE NEAREST POLICE OR PUBLIC SAFETY
AUTHORITY, THE U.S. ENVIRONMENTAL PROTECTION AGENCY OR THE
NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERATOR INFORMATION:

NAME TROY CHEMICAL CORP.
ADDRESS _____ PHONE _____
CITY _____ STATE _____ ZIP _____
EPA ID NO. _____ MANIFEST DOCUMENT NO. _____
ACCUMULATION START DATE 7/25/19 EPA WASTE NO. _____

[SELENIUM DIOXIDE
TOXIC]

D.O.T. PROPER SHIPPING NAME AND UN OR NA NO. WITH PREFIX
HANDLE WITH CARE!

Printed By: Lab Safety Supply Inc., Janesville WI 53547-1368
Revised No. 2084T

PHOTO 1



HAZARDOUS WASTE

FEDERAL AND/OR STATE LAWS PROHIBIT IMPROPER DISPOSAL
IF FOUND, CONTACT THE NEAREST POLICE OR PUBLIC DISPOSAL
AUTHORITY, THE U.S. ENVIRONMENTAL PROTECTION AGENCY OR THE
NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERATOR INFORMATION:

NAME TROY CHEMICAL COMPANY
 ADDRESS 1 AVE L
 CITY NEWARK PHONE _____ STATE NJ ZIP _____
 EPA ID NO. _____ MANIFEST DOCUMENT NO. _____
 ACCUMULATION START DATE _____ EPA WASTE NO. _____

[METHANOL, IPA, ACN, H₂O]
IGNITABLE / TOXIC

D.O.T. PROPER SHIPPING NAME AND UN OR NA NO. WITH PREFIX
HANDLE WITH CARE!

PHOTO 9



EMERGENCY SPILLS-ACTIONS

What do you do?

- First, ensure your own personal safety!
- If it is safe to do so, attempt to stop the release at its source (i.e., close valves, upright drums, etc.)
- Take action to prevent the spill from entering drains/trenches and to minimize the area affected by using the spill materials located in the spill kits.
- Contact supervisor or SHE Department-(page or call from list below)
- If necessary, perform additional cleanup

Site Personnel	Troy Extension	Cell
Production Supervisor	x3346	973-296-2231
Plant Security	x3343	973-277-4916
Plant Manager (Rob Zedeck)	x3373	973-610-4821
Environmental (Bill Reilley)	x3254	973-508-4628
Safety (Jim Manzella)	x3342	973-224-3525
SHE Director (Donn Hirschmann)	x3386	973-307-6977

Plant Paging System
Dial 5555; wait for beep and then speak
Nearest phone- Building 56

PHOTO 10

TROY

EMERGENCY SPILLS-ACTIONS

What do you do?

- First, ensure your own personal safety!
- If it is safe to do so, attempt to stop the release at its source (i.e., close valves, upright drums, etc.)
- Take action to prevent the spill from entering drains/trenches and to minimize the area affected by using the spill materials located in the spill kits.
- Contact supervisor or SHE Department (page or call from list below)
- If necessary, perform additional cleanup.

Site Personnel	Troy Extension	Cell
Site Supervisor	x3346	973-286-2231
Plant Security	x3343	973-277-4916
Plant Manager (Rob Zolack)	x3378	973-610-4821
Environmental (M. P. & C.)	x3254	973-508-4628
Safety (Lyn Marenta)	x3342	973-234-3525
SHE Director (Dann Henderson)	x3386	973-307-6977

Plant Paging System

Dial 8854, wait for beep and then speak
Plant Paging Building 50

3307



PHONE